



UIC Chicago Kent

SEP 27 1993

College of Law Library

1993

Illinois Register

Rules of Governmental Agencies

Volume 17, Issue 39 — September 24, 1993

Pages 15217-15746

Index Department
Administrative Code Div.
Springfield, IL
(217) 782-9786

published by
George H. Ryan
Secretary of State



Printed on recycled paper

TABLE OF CONTENTS

PROPOSED RULES

CENTRAL MANAGEMENT SERVICES, DEPARTMENT OF	
Acquisition, Management & Disposal of Real Property;	
44 Ill. Adm. Code 5000	15217
CHILDREN AND FAMILY SERVICES	
Reports of Child Abuse & Neglect; 89 Ill. Adm. Code 300	15218
NUCLEAR SAFETY, DEPARTMENT OF	
Safe Operation of Nuclear Facility Boilers & Pressure Vessels;	
32 Ill. Adm. Code 505	15220
POLLUTION CONTROL BOARD	
Effluent Standards; 35 Ill. Adm. Code 304	15223
PUBLIC AID, DEPARTMENT OF	
Child Support Enforcement; 89 Ill. Adm. Code 160	15229
Diagnosis Related Grouping (DRG) Prospective Payment System (PPS);	
89 Ill. Adm. Code 149	15243
Hospital Services; 89 Ill. Adm. Code 148	15291
Medical Payment; 89 Ill. Adm. Code 140	15444
Rights & Responsibilities; 89 Ill. Adm. Code 102	15461
REVENUE, DEPARTMENT OF	
Income Tax; 86 Ill. Adm. Code 100	15471
Retailers' Occupation Tax; 86 Ill. Adm. Code 130	15501
Service Occupation Act; 86 Ill. Adm. Code 140	15515
Service Use Tax; 86 Ill. Adm. Code 160	15522
Use Tax; 86 Ill. Adm. Code 150	15527

ADOPTED RULES

CONSERVATION, DEPARTMENT OF	
Cock Pheasant, Hungarian Partridge, Bobwhite Quail, Rabbit & Crow Hunting;	
17 Ill. Adm. Code 530	15534
HUMAN RIGHTS, DEPARTMENT OF	
Procedural; 56 Ill. Adm. Code 2520	15556
INSURANCE, DEPARTMENT OF	
Internal Security Standard & Fidelity Bonds; 50 Ill. Adm. Code 904	15584

ADOPTED RULES (CONT'D)

LABOR RELATIONS BOARD, ILLINOIS STATE

General Procedures; 80 Ill. Adm. Code 1200	15588
Impasse Resolution; 80 Ill. Adm. Code 1230	15599
Representation Proceedings; 80 Ill. Adm. Code 1210	15612
Unfair Labor Practice Proceedings; 80 Ill. Adm. Code 1220	15628

POLLUTION CONTROL BOARD

Hazardous Waste Injection Restrictions; 35 Ill. Adm. Code 738	15641
Underground Injection Control Operating Requirements; 35 Ill. Adm. Code 730	15646

EMERGENCY RULES

CENTRAL MANAGEMENT SERVICES, DEPARTMENT OF

Acquisition, Management & Disposal of Real Property; 44 Ill. Adm. Code 5000	15653
--	-------

CHILDREN AND FAMILY SERVICES, DEPARTMENT OF

Reports of Child Abuse & Neglect; 89 Ill. Adm. Code 300	15658
---	-------

NUCLEAR SAFETY, DEPARTMENT OF

Safe Operation of Nuclear Facility Boilers & Pressure Vessels; 32 Ill. Adm. Code 505	15667
---	-------

PEREMPTORY RULES

AGRICULTURE, DEPARTMENT OF

Meat & Poultry Inspection Act; 8 Ill. Adm. Code 125	15725
---	-------

JOINT COMMITTEE ON ADMINISTRATIVE RULES

Second Notices Received	15734
-----------------------------------	-------

EXECUTIVE ORDERS AND PROCLAMATIONS

EXECUTIVE ORDERS

93-6 Family Preservation Task Force	15738
---	-------

PROCLAMATIONS

93-406 Certified Professional Secretaries Month	15739
93-407 Crime Prevention Month	15739
93-408 German-American Day	15740
93-409 Lions Candy Day	15741
93-410 Osteopathic Medicine Week	15741
93-411 Amigos De Ser Day	15741
93-412 Mexican Independence Week	15742

PROCLAMATIONS (CONT'D)

93-413 D.A.R.E. Day	15742
93-414 Deaf Awareness Week	15743
93-415 Employment Equity Week	15744
93-416 Help Retarded Citizens Days	15744
93-417 Italian Heritage Month	15745
93-418 Travelers With Disabilities Awareness Week	15745

CUMULATIVE INDEX

1993 Index - Issue #39	CI-1
------------------------	------

SECTIONS AFFECTED INDEX

1993 Index - Issue #39	SAI-1
------------------------	-------

REGISTER PUBLICATION SCHEDULE 1993

Material Rec'd after 4:30 p.m. on:	And before Noon on:	Will be in Issue #:	Published on:	Material Rec'd after 4:30 p.m. on:	And before Noon on:	Will be in Issue #:	Published on:
Dec. 16, 1992	Dec. 23, 1992	1	(Mon.) Jan. 4, 1993	June 22, 1993	June 29, 1993	28	July 9, 1993
Dec. 23, 1992	Dec. 30, 1992	2	Jan. 8, 1993	June 29, 1993	July 6, 1993	29	July 16, 1993
Dec. 30, 1992	Jan. 5, 1993	3	Jan. 15, 1993	July 6, 1993	July 13, 1993	30	July 23, 1993
Jan. 5, 1993	Jan. 12, 1993	4	Jan. 22, 1993	July 13, 1993	July 20, 1993	31	July 30, 1993
Jan. 12, 1993	Jan. 19, 1993	5	Jan. 29, 1993	July 20, 1993	July 27, 1993	32	Aug. 6, 1993
Jan. 19, 1993	Jan. 26, 1993	6	Feb. 5, 1993	July 27, 1993	Aug. 3, 1993	33	Aug. 13, 1993
Jan. 26, 1993	Feb. 2, 1993	7	(Tues.) Feb. 16, 1993	Aug. 3, 1993	Aug. 10, 1993	34	Aug. 20, 1993
Feb. 2, 1993	Feb. 9, 1993	8	Feb. 19, 1993	Aug. 10, 1993	Aug. 17, 1993	35	Aug. 27, 1993
Feb. 9, 1993	Feb. 16, 1993	9	Feb. 26, 1993	Aug. 17, 1993	Aug. 24, 1993	36	Sept. 3, 1993
Feb. 16, 1993	Feb. 23, 1993	10	Mar. 5, 1993	Aug. 24, 1993	Aug. 31, 1993	37	Sept. 10, 1993
Feb. 23, 1993	Mar. 2, 1993	11	Mar. 12, 1993	Aug. 31, 1993	Sept. 7, 1993	38	Sept. 17, 1993
Mar. 2, 1993	Mar. 9, 1993	12	Mar. 19, 1993	Sept. 7, 1993	Sept. 14, 1993	39	Sept. 24, 1993
Mar. 9, 1993	Mar. 16, 1993	13	Mar. 26, 1993	Sept. 14, 1993	Sept. 21, 1993	40	Oct. 1, 1993
Mar. 16, 1993	Mar. 23, 1993	14	Apr. 2, 1993	Sept. 21, 1993	Sept. 28, 1993	41	Oct. 8, 1993
Mar. 23, 1993	Mar. 30, 1993	15	Apr. 9, 1993	Sept. 28, 1993	Oct. 5, 1993	42	Oct. 15, 1993
Mar. 30, 1993	Apr. 6, 1993	16	Apr. 16, 1993	Oct. 5, 1993	Oct. 12, 1993	43	Oct. 22, 1993
Apr. 6, 1993	Apr. 13, 1993	17	Apr. 23, 1993	Oct. 12, 1993	Oct. 19, 1993	44	Oct. 29, 1993
Apr. 13, 1993	Apr. 20, 1993	18	Apr. 30, 1993	Oct. 19, 1993	Oct. 26, 1993	45	Nov. 5, 1993
Apr. 20, 1993	Apr. 27, 1993	19	May 7, 1993	Oct. 26, 1993	Nov. 2, 1993	46	Nov. 12, 1993
Apr. 27, 1993	May 4, 1993	20	May 14, 1993	Nov. 2, 1993	Nov. 9, 1993	47	Nov. 19, 1993
May 4, 1993	May 11, 1993	21	May 21, 1993	Nov. 9, 1993	Nov. 16, 1993	48	Nov. 29, 1993 (Mon.)
May 11, 1993	May 18, 1993	22	May 28, 1993	Nov. 16, 1993	Nov. 23, 1993	49	Dec. 3, 1993
May 18, 1993	May 25, 1993	23	June 4, 1993	Nov. 23, 1993	Nov. 30, 1993	50	Dec. 10, 1993
May 25, 1993	June 1, 1993	24	June 11, 1993	Nov. 30, 1993	Dec. 7, 1993	51	Dec. 17, 1993
June 1, 1993	June 8, 1993	25	June 18, 1993	Dec. 7, 1993	Dec. 14, 1993	52	Dec. 27, 1993 (Mon.)
June 8, 1993	June 15, 1993	26	June 25, 1993	Dec. 14, 1993	Dec. 21, 1993	1	Jan. 3, 1994 (Mon.)
June 15, 1993	June 22, 1993	27	July 2, 1993	Dec. 21, 1993	Dec. 28, 1993	2	Jan. 7, 1994

Please note: When the Register deadline falls on a State holiday, the deadline becomes 4:30 p.m. on Monday (the day before).

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PROPOSED AMENDMENT

- 1) Heading of the Part: Acquisition, Management and Disposal of Real Property
 - 2) Code Citation: 44 Ill. Adm. Code 5000
 - 3) Section number: Proposed Action:
5000.250 New
 - 4) Statutory Authority: Ill. Rev. Stat. 1991, ch. 127, par. 63b13.2 [20 ILCS 405/67.02]
 - 5) A Complete Description of the Subjects and Issues Involved:
Current rules do not provide for suspension of the application of lease acquisition rules which would prevent, delay or hinder emergency real property lease transactions required to facilitate disaster response and recovery programs. The proposed rule corrects that situation.
 - 6) Will this proposed amendment replace an emergency rule currently in effect? Yes.
 - 7) Does this rulemaking contain an automatic repeal date? No.
 - 8) Does this proposed amendment contain incorporations by reference? No.
 - 9) Are there any other proposed amendments pending on this Part? No.
 - 10) Statement of Statewide Policy Objectives: Rulemaking does not affect units of local government.
 - 11) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Interested persons may submit written comments within 45 days of the date of publication to:

Stephen M. Seiple
720 Stratton Office Building
Springfield, IL 62706
(217)782-9669
 - 12) Initial Regulatory Flexibility Analysis: Not applicable.
- The full text of the Proposed Amendment is identical to the text of the Emergency Amendment which appears in this issue of the Register on page 15654.

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

- 1) Heading of Part: Reports of Child Abuse and Neglect
- 2) Code Citation: 89 Ill. Adm. Code 300
- 3) Section Numbers: Proposed Action:
300.20 Amendment
- 4) Statutory Authority: Section 3 of the Abused and Neglected Child Reporting Act (Ill. Rev. Stat. 1991, ch. 23, par. 2053) [325 ILCS 5/3] as amended by Public Act 88-85 effective July 14, 1993.
- 5) A Complete Description of the Subjects and Issues Involved: The Department will no longer consider a child neglected for the sole reason that the child's parent or other person responsible for the child's welfare left the child in the care of an adult relative for any period of time as a plan of care.
- 6) Will this proposed amendment replace an emergency rule currently in effect? Yes
- 7) Does this rulemaking contain an automatic repeal date: Yes ☒ No ☐
If "yes", date: _____
- 8) Does this proposed amendment contain incorporations by reference? No
- 9) Are there any other amendments pending on this Part? No
- 10) Statement of Statewide Policy Objectives: This amendment does not create or expand a state mandate as defined in Section 3(b) of the State Mandates Act (Ill. Rev. Stat. 1991, ch. 85, par. 2203) [30 ILCS 805/3].
- 11) Time, Place, and Manner in which interested persons may comment on this proposed rulemaking"

Comments on this proposed rulemaking may be submitted in writing for a period of 45 days following publication on this notice. Comments should be submitted to:

Jacqueline Nottingham, Chief
Office of Rules and Procedures
Department of Children and Family Services
406 East Monroe
Springfield, Illinois 62701-1498
217/524-1983

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

NOTICE OF PROPOSED AMENDMENTS

TDD/TTY 217/524-3715

The Department will consider fully all written comments on this proposed rulemaking submitted during the 45-day comment period. Comments submitted by small businesses should be identified as such. No public hearings are scheduled on these proposed amendments. Persons who need translation or interpretation services to enable their commentary should request assistance by contacting the Office of Rules and Procedures.

- 12) Initial Regulatory Flexibility Analysis: The Department has determined that the proposed amendment does not have an effect on small businesses.

The full text of the proposed amendment is identical to the emergency amendment appearing in this issue of the Illinois Register on page 15660

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF PROPOSED RULES

- 1) Heading of the Part: Safe Operation of Nuclear Facility Boilers and Pressure Vessels

- 2) Code Citation: 32 Ill. Adm. Code 505

- 3) Section Number: Proposed Action:

505.10	New Section
505.20	New Section
505.30	New Section
505.40	New Section
505.50	New Section
505.60	New Section
505.70	New Section
505.80	New Section
505.82	New Section
505.84	New Section
505.86	New Section
505.90	New Section
505.100	New Section
505.110	New Section
505.120	New Section
505.130	New Section
505.140	New Section
505.150	New Section
505.160	New Section
505.170	New Section
505.180	New Section
505.190	New Section
505.1000	New Section
505.1100	New Section
505.1200	New Section
505.1300	New Section
505.1400	New Section
505.1500	New Section
505.1600	New Section
505.1700	New Section
505.1800	New Section
505.1900	New Section
505.2000	New Section
505.2100	New Section
505.2200	New Section
505.2300	New Section
505.2400	New Section
505.2500	New Section
505.2600	New Section
505.2700	New Section

505.2800
505.2900

New Section
New Section

4) Statutory Authority: Implementing and authorized by Section 8(a)(8) of the Illinois Nuclear Safety Preparedness Act (Ill. Rev. Stat. 1991, ch. 111½ par. 4308) [420 ILCS 5], Section 2a of the Boiler and Pressure Vessel Safety Act (Ill. Rev. Stat. 1991, ch. 111½, par. 3202a) [430 ILCS 75], and by Section 71(C) of the Civil Administrative Code of Illinois (Ill. Rev. Stat. 1991, ch. 127, par. 63B17(C)) [20 ILCS 2005/71].

5) A Complete Description of the Subjects and Issues Involved: The Department is proposing this rule to implement its statutory authority relating to boiler and pressure vessel safety, by establishing a program to require the use of nationally recognized standards for the safe and proper design, construction, installation, repair, alteration, inspection, examination and testing, and use of boilers and pressure vessels at nuclear facilities in the state. The rule provides for the registration of boilers and pressure vessels. It also provides for the issuance of inspection certificates for nuclear power systems, and boilers and pressure vessels outside the regulatory purview of the Nuclear Regulatory Commission, to document that such systems, boilers and pressure vessels comply with these rules.

6) Will this proposed rule replace an emergency rule currently in effect?
Yes

7) Does this rulemaking contain an automatic repeal date? No

8) Does this proposed rule contain incorporations by reference? Yes

9) Are there any other proposed amendments pending on this Part? No

10) Statement of Statewide Policy Objectives: The requirements imposed by the proposed rulemaking are not expected to require local governments to establish, expand, or modify their activities in such a way as to necessitate additional expenditures from local revenues.

11) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Comments on this proposed rulemaking may be submitted in writing for a period of 45 days following publication of this notice. The Department will consider fully all written comments on this proposed rulemaking submitted during the 45 day comment period. Comments should be submitted to:

Lyle Black
Staff Attorney
Department of Nuclear Safety
1035 Outer Park Drive
Springfield, Illinois 62704
(217) 524-0770 (voice)
(217) 782-6133 (TDD)

12) Initial Regulatory Flexibility Analysis:

- A) Types of small businesses, small municipalities and not for profit corporations affected: These rules only apply to nuclear power plants, therefore these rules will have no effect on any small business, small municipalities or not for profit corporations.
- B) Reporting, bookkeeping or other procedures required for compliance: No change from those currently required by the current rules of the Office of the State Fire Marshal and the ASME Code.
- C) Types of professional skills necessary for compliance: No change from those currently required by the current rules of the Office of the State Fire Marshal and the ASME Code.

The full text of the Proposed Rules are identical to the emergency rules which begins on page 15671.

POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

- 1) Heading of Part: Effluent Standards
- 2) Code Citation: 35 Ill. Adm. Code 304
- 3) Section Numbers: Proposed Action:
304.213 Amendment
- 4) Statutory Authority: 415 ILCS 5/13 and 27
- 5) A Complete Description of the Subjects and Issues Involved:
UNO-VEN is proposing the following changes to the site-specific rule provided for Union Oil in 1987: (1) change Union Oil of California to UNO-VEN to reflect a change in ownership; (2) add a concentration-based limitation for ammonia nitrogen on a monthly basis; (3) require a report on nitrogen in feedstock within 60 days after the end of the calendar year; and (4) to extend the expiration date of the rule until December 31, 1999. A more complete description of this rulemaking is available from the Board's August 26, opinion and UNO-VEN's proposal. Copies of the opinion and proposal in R93-8 are available for review or copying through the Clerk of the Board.
- 6) Will this proposed rule replace an emergency rule currently in effect? No
- 7) Does this rulemaking contain an automatic repeal date?
Yes, December 31, 1999.
- 8) Does this proposed amendment contain incorporations by reference? No
- 9) Are there any other proposed amendments pending on this Part? No
- 10) Statement of Statewide Policy Objectives: Not applicable, this is a site-specific rule.

POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

- 11) Time, Place, and Manner in which interested persons may comment on this proposed rulemaking: Send written comments concerning R93-8 within 45 days of publication in the Illinois Register to:

Clerk of the Pollution Control Board
100 West Randolph Street
Suite 11-500
Chicago, Illinois 60601
- All comments should be clearly marked with the docket number R93-8.
- 12) Initial Regulatory Flexibility Analysis:
- A) Date rule was submitted to the Business Assistance Office of the Department of Commerce and Community Affairs: August 31, 1993
- B) Types of small businesses affected: None, this rule only applies to UNO-VEN Company.
- C) Reporting, bookkeeping or other procedures required for compliance: UNO-VEN is required to continue to report its effluent.
- D) Types of professional skills necessary for compliance: technical, engineering, scientific and recordkeeping

The full text of the Proposed Amendments begins on the next page:

POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

TITLE 35: ENVIRONMENTAL PROTECTION

SUBTITLE C: WATER POLLUTION

CHAPTER I: POLLUTION CONTROL BOARD

PART 304

EFFLUENT STANDARDS

SUBPART A: GENERAL EFFLUENT STANDARDS

Section

304.101 Preamble
 304.102 Dilution
 304.103 Background Concentrations
 304.104 Averaging
 304.105 Violation of Water Quality Standards
 304.106 Offensive Discharges
 304.120 Deoxygenating Wastes
 304.121 Bacteria
 304.122 Nitrogen (STORET number 00610)
 304.123 Phosphorus (STORET number 00665)
 304.124 Additional Contaminants
 304.125 pH
 304.126 Mercury
 304.140 Delays in Upgrading (Repealed)
 304.141 NPDES Effluent Standards
 304.142 New Source Performance Standards (Repealed)

SUBPART B: SITE SPECIFIC RULES AND EXCEPTIONS NOT OF GENERAL APPLICABILITY

Section

304.201 Wastewater Treatment Plant Discharges of The Metropolitan Sanitary District of Greater Chicago
 304.202 Chlor-alkali Mercury Discharges in St. Clair County
 304.203 Copper Discharges by Olin Corporation
 304.204 Schoenberger Creek: Groundwater Discharges
 304.205 John Deere Foundry Discharges
 304.206 Alton Water Company Treatment Plant Discharges
 304.207 Galesburg Sanitary District Deoxygenating Wastes Discharges
 304.208 City of Lockport Treatment Plant Discharges
 304.209 Wood River Station Total Suspended Solids Discharges
 304.210 Alton Wastewater Treatment Plant Discharges
 304.211 Discharges From Borden Chemicals and Plastics Operating Limited Partnership Into an Unnamed Tributary of Long

POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

Point Slough

304.212 Sanitary District of Decatur Discharges
 304.213 ~~Union Oil~~ UNO-VEN Refinery Ammonia Discharge
 304.214 Mobil Oil Refinery Ammonia Discharge
 304.215 City of Tuscola Wastewater Treatment Facility Discharges
 304.216 Newton Station Suspended Solids Discharges
 304.218 City of Pana Phosphorus Discharge
 304.219 North Shore Sanitary District Phosphorus Discharges
 304.220 East St. Louis Treatment Facility, Illinois-American Water Company
 304.221 Ringwood Drive Manufacturing Facility in McHenry County
 304.222 Intermittent Discharge of TRC

SUBPART C: TEMPORARY EFFLUENT STANDARDS

Section

304.301 Exception for Ammonia Nitrogen Water Quality Violations
 304.302 City of Joliet East Side Wastewater Treatment Plant

APPENDIX A: References to Previous Rules

AUTHORITY: Implementing Section 13 and authorized by Section 27 of the Environmental Protection Act (Ill. Rev. Stat. 1991, ch. 111 1/2, pars. 1013 and 1027)[415 ILCS 5/13 and 27].

SOURCE: Filed with the Secretary of State January 1, 1978; amended at 2 Ill. Reg. 30, p. 343, effective July 27, 1978; amended at 2 Ill. Reg. 44, p. 151, effective November 2, 1978; amended at 3 Ill. Reg. 20, p. 95, effective May 17, 1979; amended at 4 Ill. Reg. 25, p. 190, effective June 21, 1979; amended at 4 Ill. Reg. 20, p. 53, effective May 7, 1980; amended at 6 Ill. Reg. 563, effective December 24, 1981; codified at 6 Ill. Reg. 7818; amended at 6 Ill. Reg. 11161, effective September 7, 1982; amended at 6 Ill. Reg. 13750, effective October 26, 1982; amended at 7 Ill. Reg. 3020, effective March 4, 1983; amended at 7 Ill. Reg. 8111, effective June 23, 1983; amended at 7 Ill. Reg. 14515, effective October 14, 1983; amended at 7 Ill. Reg. 14910, effective November 14, 1983; amended at 8 Ill. Reg. 1600, effective January 18, 1984; amended at 8 Ill. Reg. 3687, effective March 14, 1984; amended at 8 Ill. Reg. 8237, effective June 8, 1984; amended at 9 Ill. Reg. 1379, effective January 21, 1985; amended at 9 Ill. Reg. 4510, effective March 22, 1985; peremptory amendment at 10 Ill. Reg. 456, effective December 23, 1985; amended at 11 Ill. Reg. 3117, effective January 28, 1987;

POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

amended in R84-13 at 11 Ill. Reg. 7291, effective April 3, 1987; amended in R86-17(A) at 11 Ill. Reg. 14748, effective August 24, 1987; amended in R84-16 at 12 Ill. Reg. 2445, effective January 15, 1988; amended in R83-23 at 12 Ill. Reg. 8658, effective May 10, 1988; amended in R87-27 at 12 Ill. Reg. 9905, effective May 27, 1988; amended in R82-7 at 12 Ill. Reg. 10712, effective June 9, 1988; amended in R85-29 at 12 Ill. Reg. 12064, effective July 12, 1988; amended in R87-22 at 12 Ill. Reg. 13966, effective August 23, 1988; amended in R86-3 at 12 Ill. Reg. 20126, effective November 16, 1988; amended in R84-20 at 13 Ill. Reg. 851, effective January 9, 1989; amended in R85-11 at 13 Ill. Reg. 2060, effective February 6, 1989; amended in R88-1 at 13 Ill. Reg. 5976, effective April 18, 1989; amended in R86-17(B) at 13 Ill. Reg. 7754, effective May 4, 1989; amended in R88-22 at 13 Ill. Reg. 8880, effective May 26, 1989; amended in R87-6 at 14 Ill. Reg. 6777, effective April 24, 1990; amended in R87-36 at 14 Ill. Reg. 9437, effective May 31, 1990; amended in R88-21(B) at 14 Ill. Reg. 12538, effective July 18, 1990; amended in R84-44 at 14 Ill. Reg. 20719, effective December 11, 1990; amended in R86-14 at 15 Ill. Reg. 241, effective December 18, 1990; amended in _____ at _____ Ill. Reg. _____, effective _____.

POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

Section 304.213 ~~Union Oil~~ UNO-VEN Refinery Ammonia Discharge

- a) This Section applies to discharges from ~~Union Oil Company of California's~~ UNO-VEN Chicago Refinery, located in Lemont into the Chicago Sanitary and Ship Canal.
- b) The requirements of Section 304.122(b) shall not apply to the discharge. Instead ~~the~~ UNO-VEN must meet applicable Best Available Technology Economically Achievable (BAT) limitations pursuant to 40 CFR 419.23 (1985) (1992) incorporated by reference in subsection (c). UNO-VEN shall also meet a monthly average limitation for ammonia nitrogen of 9.4 mg/l and a daily maximum limitation of 26.0 mg/l.
- c) The Board incorporates by reference 40 CFR 419.23 (1985) (1992) only as it relates to ammonia nitrogen as N. This incorporation includes no subsequent amendments or editions.
- d) ~~The~~ UNO-VEN shall continue its efforts to reduce the concentration of ammonia nitrogen in its wastewaters.
- e) ~~The~~ UNO-VEN shall monitor the nitrogen concentration of its oil feedstocks and report on an annual basis such concentrations to the Agency.
- f) ~~The~~ UNO-VEN shall submit the reports described in subsection (e) no later than 30 60 days after the end of a calendar year.
- g) The provisions of this Section shall terminate on ~~December 31, 1993~~ December 31, 1999.

(Source: Amended at _____ Ill. Reg. _____, effective _____.)

NOTICE OF PROPOSED AMENDMENTS

1) Heading of the Part: Child Support Enforcement

2) Code Citation: 89 Ill. Adm. Code 160

3) Section Number: Proposed Action:

160.70

Amendment

4) Statutory Authority: (45 CFR 303.72, 45 CFR 303.102, 305 ILCS 5/10-17.3 and 305 ILCS 5/10-17.5)

5) Complete Description of the Subjects and Issues Involved: The Department collects past-due support owed by responsible relatives in IV-D cases through intercept of federal and State income tax refunds and other State payments. This rulemaking is necessary to improve the efficiency of Illinois' tax offset program. In order to ensure full client collection services, these proposed amendments change the period within which a responsible relative's protest will effect a stay of submittal for offset from 30 days to 15 days. As a result of these proposed amendments, a request for a redetermination made within 15 days from the date of mailing of the advance notice will stay the Department from submitting the past-due support amount for intercept.

6) Will these proposed amendments replace emergency amendments currently in effect? No

7) Does this rulemaking contain an automatic repeal date? No

8) Do these proposed amendments contain incorporations by reference? No

9) Are there any other proposed amendments pending on this Part? Yes

Sections	Proposed Action	Illinois Register Citation
160.1	Amendment	March 26, 1993 (17 Ill. Reg. 3820)
160.5	Amendment	March 26, 1993 (17 Ill. Reg. 3820)
160.5	Amendment	August 6, 1993 (17 Ill. Reg. 12573)
160.15	New Section	March 26, 1993 (17 Ill. Reg. 3820)
160.25	New Section	March 26, 1993 (17 Ill. Reg. 3820)
160.65	Amendment	July 30, 1993 (17 Ill. Reg. 12067)
160.70	Amendment	August 6, 1993 (17 Ill. Reg. 12573)
160.77	New Section	March 26, 1993 (17 Ill. Reg. 3820)

10) Statement of Statewide Policy Objectives: These proposed amendments do not affect units of local government.

11) Time, Place, and Manner in which Interested Persons may comment on this proposed rulemaking: Any interested parties may submit comments, data,

NOTICE OF PROPOSED AMENDMENTS

views, or arguments concerning this proposed rulemaking. All comments must be in writing and should be addressed to Judy Umunna, Bureau of Rules and Regulations, Illinois Department of Public Aid, 100 South Grand Ave. E., 3rd Floor, Springfield, Illinois 62762. The Department will consider all written comments it receives within 30 days after the publication of this notice.

12) Initial Regulatory Flexibility Analysis:

- A) Date proposed rulemaking was submitted to the Business Assistance Office of the Department of Commerce and Community Affairs: Not applicable
- B) Types of small businesses affected: None
- C) Reporting, bookkeeping or other procedures required for compliance: None
- D) Types of professional skills necessary for compliance: None

The full text of the Proposed Amendments begins on the next page:

TITLE 89: SOCIAL SERVICES
CHAPTER I: DEPARTMENT OF PUBLIC AID
SUBCHAPTER f: COLLECTIONS

PART 160

CHILD SUPPORT ENFORCEMENT

SUBPART A: CHILD SUPPORT ENFORCEMENT

Section
160.1 Incorporation By Reference
160.5 Definitions
160.10 Child Support Enforcement Program
160.20 Assignment of Rights to Support

SUBPART B: COOPERATION WITH CHILD SUPPORT ENFORCEMENT

Section
160.30 Cooperation With Support Enforcement Program
160.35 Good Cause For Failure to Cooperate With Support Enforcement
160.40 Proof of Good Cause For Failure to Cooperate With Support Enforcement
160.45 Suspension of Child Support Enforcement Upon Finding of Good Cause

SUBPART C: ESTABLISHMENT AND MODIFICATION OF CHILD SUPPORT ORDERS

Section
160.60 Establishment of Support Obligations
160.65 Modification of Support Obligations

SUBPART D: ENFORCEMENT OF CHILD SUPPORT ORDERS

Section
160.70 Enforcement of Support Orders
160.75 Withholding of Income to Secure Payment of Support
160.80 Amnesty - 20% Charge
160.85 Diligent Efforts to Serve Process

SUBPART E: EARMARKING CHILD SUPPORT PAYMENTS

Section
160.90 Earmarking Child Support Payments

SUBPART F: DISTRIBUTION OF SUPPORT COLLECTIONS

Section
160.100 Distribution Of Child Support For AFDC Recipients

160.110 Distribution Of Child Support For Former AFDC Recipients Who Continue To Receive Child Support Enforcement Services
160.120 Distribution Of Child Support Collected While The Client Was An AFDC Recipient, But Not Yet Distributed At The Time The AFDC Case Is Cancelled

160.130 Distribution Of Intercepted Income Tax Refunds and Other State Payments

160.132 Distribution of Child Support for Non-AFDC Clients
160.134 Distribution of Child Support For Interstate Cases

160.136 Distribution of Support Collected in IV-E Foster Care Maintenance Cases

160.138 Distribution of Child Support for Medical Assistance No Grant Cases

SUBPART G: STATEMENT OF CHILD SUPPORT ACCOUNT ACTIVITY

160.140 Statement Of Child Support Account Activity

SUBPART H: DEPARTMENT REVIEW OF DISTRIBUTION OF CHILD SUPPORT

160.150 Department Review Of Distribution Of Child Support For AFDC Recipients
160.160 Department Review Of Distribution Of Child Support For Former AFDC Recipients

AUTHORITY: Implementing and authorized by Sections 4-1.7, 10-1 et seq., 12-4.3, and 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, pars. 4-1.7, 10-1 et seq., 12-4.3 and 12-13) [305 ILCS 5/4-1.7, 5/10-1, 5/12-4.3 and 5/12-13]

SOURCE: Recodified from 89 Ill. Adm. Code 112.78 through 112.86 and 112.88 at 10 Ill. Reg. 11928; amended at 10 Ill. Reg. 19990, effective November 14, 1986; emergency amendment at 11 Ill. Reg. 4800, effective March 5, 1987, for a maximum of 150 days; amended at 11 Ill. Reg. 9129, effective April 30, 1987; amended at 11 Ill. Reg. 15208, effective August 31, 1987; emergency amendment at 11 Ill. Reg. 1563, effective December 31, 1987, for a maximum of 150 days; amended at 12 Ill. Reg. 9065, effective May 16, 1988; amended at 12 Ill. Reg. 18185, effective November 4, 1988; emergency amendment at 12 Ill. Reg. 20835, effective December 2, 1988, for a maximum of 150 days; amended at 12 Ill. Reg. 22278, effective January 1, 1989; amended at 13 Ill. Reg. 4268, effective March 21, 1989; amended at 13 Ill. Reg. 7761, effective May 22, 1989; amended at 13 Ill. Reg. 14385, effective September 1, 1989; amended at 13 Ill. Reg. 16768, effective October 12, 1989; amended at 14 Ill. Reg. 18759, effective November 9, 1990; amended at 16 Ill. Reg. 1034, effective January 21, 1991; amended at 16 Ill. Reg. 1852, effective January 20, 1992; amended at 16 Ill. Reg. 9997, effective June 15, 1992; amended at 17 Ill. Reg. 2272, effective February 11, 1993; amended at 17 Ill. Reg. —, effective —.

NOTE: CAPITALIZATION DENOTES STATUTORY LANGUAGE.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

SUBPART D: ENFORCEMENT OF CHILD SUPPORT ORDERS

Section 160.70 Enforcement of Support Orders

a) Definitions

The definitions contained in Section 160.60(a) are incorporated herein by reference.

b) Income Withholding

Whether using the administrative process (see Section 160.60(d)) or the judicial process (see Section 160.60(e)), the Department shall follow the procedures for withholding of income contained in Section 160.75 to enforce and collect past-due support owed by responsible relatives in IV-D cases and it shall as promptly as possible distribute all amounts collected. In addition to income as defined in Section 160.75, the Department shall proceed to collect support from the principal and income of trusts as provided by Section 2-1403 of the Code of Civil Procedure (Ill. Rev. Stat. 1989, ch. 110, par. 2-1403).

c) Federal and State Income Tax Refunds and Other State Payments

1) The Department shall collect past-due support owed by responsible relatives in IV-D cases through intercept of federal and State income tax refunds and other State payments (see Section 10.05a of the State Comptroller Act (Ill. Rev. Stat. 1989, ch. 15, par. 210.05a) due such relatives.

2) The Department shall submit past-due support amounts to:

A) the Department of Health and Human Services to intercept federal income tax refunds in accordance with federal instructions as follows:

i) in IV-D AFDC and IV-D foster care cases, past-due support owed for a child or for a child and the parent with whom the child is living in an amount not less than \$150 which has been in arrears for 3 months or longer; and

ii) in IV-D Non-AFDC cases, past-due support owed to or for a minor child in an amount not less than \$500.

B) the Comptroller to intercept State income tax refunds and other State payments as follows:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 160.70(c)(2)(B) (continued)

i) in active IV-D cases, past-due support owed in an amount not less than one month's support obligation or \$150, whichever is less; and

ii) in inactive IV-D AFDC and IV-D foster care cases, past due support owed in any amount.

iii) In cases in which the responsible relative who owes past-due support is receiving periodic payments from this State because of employment, disability, retirement or any other reason, the Department shall, upon obtaining knowledge of such circumstances, refund any amounts inadvertently intercepted to the responsible relative and proceed to collect past-due support pursuant to the income withholding provisions of the support statutes.

3) The Department shall provide the responsible relative with a notice prior to submitting a past-due support amount for intercept, which advance notice shall inform the responsible relative of the following:

A) the IV-D case name and identification number;

B) the past-due support amount which will be submitted for intercept;

C) the right to contest the determination that past-due support is owed or the amount of past-due support by requesting:

i) a redetermination by the Department or, after such redetermination,

ii) an administrative review by any other state in which the support order was issued upon which the referral for federal income tax refund intercept is based, at the request of the responsible relative; and

D) that the Internal Revenue Service will notify the responsible relative's spouse at the time of intercept regarding the steps to take to protect the share of the refund which may be payable to that spouse, in the case of a joint federal income tax return.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 160.70(c) (continued)

- 4) A request for a redetermination made within 30 15 days from the date of mailing of the advance notice shall stay the Department from submitting the past-due amount.
- 5) No later than 120 days after the date the redetermination was requested, the Department shall provide the responsible relative with a notice of the results of the redetermination and of the right to contest such results by requesting:
 - A) a hearing by the Department within 30 days from the date of mailing of the notice; or
 - B) an administrative review by any other state in which the support order was issued upon which the referral for federal income tax refund intercept is based.
- 6) If a responsible relative requests administrative review by the state in which the support order was issued upon which the referral for federal income tax refund intercept is based, the Department shall notify the state with the order of the request and shall provide that state with all necessary information within 10 days of the responsible relative's request. The Department shall be bound by the decision of the state with the order.
- 7) The Department shall proceed in accordance with 89 Ill. Adm. Code 104.103 upon receipt of a request for a hearing.
- 8) The Department shall notify:
 - A) any other state enforcing the support order when the request for intercept is submitted and when the intercept amount is received;
 - B) the Department of Health and Human Services of any deletion of an amount submitted for federal income tax refund intercept, in accordance with federal instructions;
 - C) the Comptroller of any deletion of an amount submitted for State income tax refund or other payment intercept or any significant decrease in the amount; and
 - D) the Clerk of Circuit Court of the county in which the child support order was entered of any amount intercepted for posting to the court payment record.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 160.70(c) (continued)

- 9) The Department shall:
 - A) as promptly as possible refund to the responsible relative any amount intercepted found to exceed the amount of past-due support owed; and
 - B) equitably apportion joint State income tax refunds and other State payments based upon copies of federal and State income tax returns, including all schedules and attachments, or other evidence of ownership, such equitable apportionment to be based on the documented proportionate net income of the parties, and pay to the joint payee that portion of the amount intercepted found to be his; except that the Comptroller shall apportion such refunds and payments in matters where the intercepted funds have not yet been transferred to the Department.
- 10) The Department shall as promptly as possible apply collections it receives as a result of intercept under this subsection only against the past-due support amount specified in the advance notice provided the responsible relative pursuant to subsection (c)(3) above and shall promptly apply:
 - A) federal income tax refunds first to satisfy any IV-D AFDC or IV-D foster care assigned past-due support and then to satisfy any IV-D Non-AFDC past-due support; and
 - B) State income tax refunds and other State payments to satisfy any active IV-D AFDC and IV-D foster care assigned past-due support, or first to satisfy active IV-D Non-AFDC past-due support and then to satisfy any IV-D AFDC and IV-D foster care assigned past-due support.
- 11) The Department shall inform individuals who receive IV-D Non-AFDC support enforcement services, in advance, of the following:
 - A) amounts intercepted under this subsection will be applied in accordance with subsection (c)(9) above;
 - B) any payment received by the IV-D Non-AFDC individual as a result of federal income tax refund intercept may have to be returned to the Department within six years following the end of the tax year if there is an adjustment necessitated by the responsible relative's spouse filing an

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 160.70(c)(11)(B) (continued)

amended tax return in order to receive his share of a joint tax refund.

d) Unemployment Insurance Benefits

- 1) The Department shall collect support owed by responsible relatives in IV-D cases through intercept of unemployment insurance benefits in matters wherein the relative has accumulated a past-due support amount equal to a one month support obligation.

2) The Department shall take the following action:

- A) ascertain that the responsible relative qualifies for receipt of unemployment insurance benefits through access to the Department of Employment Security's (DES) computer file.
- B) collect child support owed through the intercept of unemployment insurance benefits by initiating procedures for income withholding in accordance with Section 160.75.
- C) establish the amount to be deducted by data entry to DES's computer file, which amount shall be the lesser of:
 - i) the amount of the income withholding order; or
 - ii) fifty percent (50%) of the Unemployment Insurance Benefit.
- D) receive amounts deducted direct from DES.
- E) notify the Clerk of the Circuit Court of the county in which the child support order is registered of each collection for posting to the court payment record.
- F) post each collection to the Department's payment record.
- G) apply each collection to the current support obligation, then to past-due obligations.
- H) provide a redetermination within 180 days from the date of request for redetermination to each relative who disputes the deduction and, where indicated, make adjustments and refund improperly deducted amounts.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 160.70(d) (continued)

- 3) The Department of Employment Security shall take the following action:

- A) provide notice to the responsible relative and an opportunity to be heard, when the Department cannot resolve the dispute.
 - B) pay all amounts deducted direct to the Department.
- e) Contempt of Court and Other Legal Proceedings
- 1) The Department shall refer IV-D cases to its legal representatives to initiate contempt of court and other legal proceedings, pursuant to the applicable provisions of the support statutes, for enforcement of orders for support in matters wherein the responsible relative has accumulated a past-due support amount equal to not less than a one month support obligation; except as set forth in subsection (2) below.

2) Contempt proceedings shall not be used in the following instances:

- A) the responsible relative has no known available income or assets from which to satisfy the support obligation and is:
 - i) receiving public assistance;
 - ii) mentally or physically disabled;
 - iii) incarcerated;
 - iv) out-of-the-country;
 - v) deceased; or
 - vi) otherwise situated making such action unproductive.
 - B) other legal or administrative remedies are more appropriate under the circumstances.
- 3) Contempt and other legal proceedings shall be used to:
- A) establish the amount of past-due support;
 - B) obtain a judgment for purposes of:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 160.70(e)(3)(B) (continued)

- i) imposition of a lien against real estate,
 - ii) levy upon real estate and personal property, or
 - iii) registration in another state;
- C) secure an order for lump sum or periodic payment of the past-due support or judgment;
- D) require the responsible relative to post security, bond or give some other guarantee of a character and amount sufficient to assure payment of any amount due under the support order;
- E) obtain full or partial payment of past due support through incarceration;
- F) ascertain the responsible relative's source and amount of income or location and value of assets;
- G) secure other enforcement relief; and
- H) obtain any combination of the above.

- 4) During the course of contempt or other legal proceedings to enforce support, if it shall appear that there is no net income because of the unemployment of a responsible relative, who resides in Illinois and is not receiving General Assistance in the City of Chicago and has children receiving AFDC in Illinois, the Department shall request the court to order the relative to report for participation in job search, training or work programs established for such relatives under Section 9-6 of the Illinois Public Aid Code (Ill. Rev. Stat. 1989, ch. 23, par. 9-6).

f) Liens Against Real Estate and Personal Property

- 1) The Department shall seek judgment liens against real estate and enforce judgments upon the real estate and personal property of responsible relatives, in IV-D cases in which a referral has been made to initiate court enforcement of an order for support, in accordance with Article XII of the Code of Civil Procedure (Ill. Rev. Stat. 1989, ch. 110, par. 12-101 et seq.).
- 2) A petition for a rule to show cause or other petition filed by a Department legal representative to enforce an order for support

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 160.70(f)(2) (continued)

shall contain a prayer that judgment be entered against the responsible relative in the amount of the past-due support alleged in the petition, when both of the following circumstances exist:

- A) the past-due amount equals one year's support obligation under the order for support or \$2,000, whichever is less; and
 - B) the responsible relative has an interest in real estate or personal property against which the judgment may be enforced.
- 3) Upon obtaining a judgment, Department legal representatives shall secure liens against the real estate of responsible relatives by filing a transcript, certified copy, or memorandum of judgment in the county wherein the real estate is located, in accordance with law (see Article XII of the Code of Civil Procedure (Ill. Rev. Stat. 1989, ch. 110, pars. 12-101 et seq.)).
- 4) A judgment shall be enforced by levy upon the real estate and personal property of the responsible relative in accordance with law (see Article XII of the Code of Civil Procedure (Ill. Rev. Stat. 1989, ch. 110, pars. 12-101 et seq.)) when the relative has a known equity which is not less than \$2,000 in excess of any statutory exemption.

g) Security, Bond or Other Guarantee of Payment

- 1) Except as provided in subsections (2) and (3) below, the Department shall require, or through its legal representative shall request the court to require, a responsible relative to post security, bond, or give some other guarantee of a character and amount sufficient to assure payment of any amount due under a support order in IV-D cases, pursuant to Section 10-17.4 of the Illinois Public Aid Code (Ill. Rev. Stat. 1989, ch. 23, par. 10-17.4).
- 2) In cases in which the support obligation is established through the administrative process contained in Section 160.60, the notice of support obligation provided to the responsible relative shall indicate that the Department may require the relative to post security, bond or give some other guarantee of payment. Except where the responsible relative is subject to income withholding, the administrative support order shall

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 160.70(g)(2) (continued)

contain this requirement in an amount equal to a one year support obligation.

- 3) In acting upon a referral to establish a support obligation or to enforce an existing order for support, Department legal representatives shall include in the complaint or petition a prayer for an order requiring the responsible relative to post security, bond, or give some other guarantee of payment equal to a one year support obligation, unless the relative is subject to the income withholding provisions of the support statutes.

h) Past-Due Support Information to Consumer Reporting Agencies

- 1) The Department shall, upon request of consumer reporting agencies, provide the following information concerning the payment records of responsible relatives in IV-D cases to such agencies when the amount of past-due support exceeds \$1,000:

- A) the name, last known address and Social Security Number of the responsible relative; and
- B) the terms and amount of past-due support which has accumulated under the order for support.

- 2) The Department shall provide the responsible relative with a notice at least 30 days prior to furnishing past-due support information to consumer reporting agencies, which advance notice shall inform the relative of the following:

- A) the IV-D case name and identification number;
- B) the past-due support amount which will be reported;
- C) the date past-due support will be reported; and
- D) the right to prevent reporting by payment of the past-due support amount in full or to contest the determination that past-due support is owed or the amount of past-due support by requesting a redetermination by the Department.

- 3) The Department shall provide the responsible relative with notice of the results of the redetermination and the right to prevent reporting by payment in full of the past-due support found to be owed or to contest the results of the redetermination by requesting a hearing within 30 days from the date of mailing of the notice.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 160.70(h) (continued)

- 4) The Department shall proceed in accordance with 89 Ill. Adm. Code 104.103 upon receipt of a request for a hearing.

- 5) The Department shall be stayed from providing information to consumer reporting agencies by either of the following:

- A) a request for
 - i) a redetermination, or
 - ii) a hearing contesting the determination that past-due support is owed or the amount of past-due support; or
- B) payment in full of the amount of the past-due support stated in the
 - i) advance notice, or
 - ii) notice of redetermination or hearing results.

- 6) The Department shall advise consumer reporting agencies of changes in the amount of past-due support found to be owed as a result of a redetermination or hearing conducted after report to such agencies.

i) Other Remedies

The Department shall pursue any other remedies provided for by law to enforce and collect past-due support owed by responsible relatives in IV-D cases.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

1) Heading of the Part: Diagnosis Related Grouping (DRG) Prospective Payment System (PPS)

2) Code Citation: 89 Ill. Adm. Code 149

3) Section Numbers: Proposed Action:

149.5, 149.10, 149.25	Amendment
149.50, 149.75, 149.100	Amendment
149.105, 149.125, 149.140	Amendment
149.150	Amendment

4) Statutory Authority: Articles III, IV, V, VI, VII and Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, pars. 3-1 et seq., 4-1 et seq., 5-1 et seq., 6-1 et seq., 7-1 et seq., and 12-13) [305 ILCS 5/3, 4, 5, 6, 7 and 12-13] and Public Act 88-88, effective July 14, 1993.

5) Complete Description of the Subjects and Issues Involved: The Department of Public Aid is proposing extensive changes in its rules governing payment under the Diagnosis Related Grouping (DRG) Prospective Payment System (PPS) (89 Ill. Adm. Code 149). Part 149 specifies a methodology for the payment of hospitals, which is an alternative to the methodologies included in the Department's hospital services rules (89 Ill. Adm. Code 148). The Department intends to adopt these changes on an emergency basis effective October 1, 1993. These changes are required to update the rules for implementation of the revised reimbursement procedures which take effect on October 1, 1993, under Public Act 88-88. Since changes are being made to most aspects of hospital reimbursement under these amendments, all of the changes cannot be summarized here in detail. Interested persons should therefore review the amendments closely.

The substantive changes are as follows:

Effective October 1, 1993, inpatient hospital reimbursement for hospitals reimbursed under the Diagnosis Related Grouping (DRG) Prospective Payment System (PPS) (89 Ill. Adm. Code 149) will be maintained at the rate in effect on June 30, 1993, with certain exceptions. Effective on and after April 1, 1994, inpatient hospital reimbursement rates for hospitals reimbursed under the above Part will be recalculated in accordance with the new provisions contained in these emergency amendments.

Many of the changes reflect additions to, or clarification of, definitions utilized by the Department with respect to hospital reimbursement.

Many of the changes clarify current reimbursement policies.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.100 (Basic Methodology for Determining DRG Prospective Payment Rates) has been revised to reflect a change in the rate period. The rate period beginning on October 1, 1992, has been extended through March 31, 1994. Effective with rate periods beginning on or after April 1, 1994, a number changes will take place in the reimbursement methodology as follows:

Reimbursement rates will be calculated on April 1, 1994, using the methodologies described in this emergency amendment. Rate periods will begin 90 days after the effective date of DRG PPS rates under the federal Medicare Program and will end 90 days after any subsequent DRG PPS rate change under the federal Medicare Program.

Hospitals deemed as rural hospitals as of July 14, 1993, that were not previously deemed as rural hospitals at the beginning of the rate period (October 1, 1992) and will be treated as sole community hospitals under the methodology described in this emergency amendment, and that elect to be reimbursed under the Diagnosis Related Grouping (DRG) Prospective Payment System (PPS) (89 Ill. Adm. Code Part 149), will be reimbursed in accordance with the methodologies described in these emergency amendments.

Estimated annual aggregate inpatient spending resulting from these changes is expected to remain unchanged.

Section 149.105 (Payment for Outlier Cases) has been revised to reflect a change in the rate period beginning on October 1, 1992, which has been extended through March 31, 1994. Effective with rate periods beginning on or after April 1, 1994, outlier payment adjustments will be calculated on April 1, 1994, using the methodologies described in these emergency amendment. Rate periods will begin 90 days after the effective date of DRG PPS rates under the federal Medicare Program and will end 90 days after any subsequent DRG PPS rate change under the federal Medicare Program.

Estimated annual aggregate inpatient spending resulting from these changes is expected to decrease by approximately \$125,000.

Section 149.125 (Special Treatment of Certain Facilities) has been revised to reflect a change in the criteria for qualification as a sole community hospital as described in these emergency amendments.

Section 149.125 has also been revised to reflect a change in the rate period, and the rate period beginning on October 1, 1992, has been extended through March 31, 1994. Effective with rate periods beginning on or after April 1, 1994, sole community hospital

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

designation will be determined on April 1, 1994, using the methodology described in this emergency amendment. Rate periods will begin 90 days after the effective date of DRG PPS rates under the federal Medicare Program and will end 90 days after any subsequent DRG PPS rate change under the federal Medicare Program.

Estimated annual aggregate inpatient spending resulting from these changes is expected to remain unchanged.

Section 149.140 (Methodology for Determining Primary Care Access Health Care Education Payments) contains extensive revisions. These revisions:

Reflect a change in the rate periods as described in these emergency amendments.

Amend the criteria for qualification for, and the payment methodology for calculation of, the primary care access health care education payments.

Require that qualified hospitals provide documentation of actual rotation time spent in qualified rotation settings as well as verification that certain facilities meet the proposed requirements of a qualified rotation setting, provide the names and program year of individual residents, and provide data maintained for residency review committees.

Establish a ceiling on the aggregate payments that may be made with respect to the Primary Care Access Health Care Education Program.

Establish an appeals process allowing hospitals the opportunity to request and receive a review of the payment and adjustment amounts calculated by the Department under the provisions of this emergency amendment.

Estimated annual aggregate inpatient spending resulting from these changes is expected to remain unchanged.

Section 149.150 (Payments to Hospitals Under the DRG Prospective Payment System) has been revised to reflect a change in the rate period. The rate period beginning on October 1, 1992, has been extended through March 31, 1994. Effective with rate periods beginning on or after April 1, 1994, a number changes will take place in the reimbursement methodology as follows:

Reimbursement rates will be calculated on April 1, 1994, using the methodologies described in this emergency amendment. Rate

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

periods will begin 90 days after the effective date of DRG PPS rates under the federal Medicare Program and will end 90 days after any subsequent DRG PPS rate change under the federal Medicare Program.

For rate periods beginning on or after April 1, 1994, payments for capital, direct medical education, indirect medical education, and Certified Registered Nurse Anesthetist (CRNA) costs will be made on a per diem, rather than a case, basis.

For the calculation of direct medical education costs, hospitals will be separated into two peer groups, major teaching hospitals and other teaching hospitals. The adjusted direct medical education cost per diem for all hospitals in each peer group will be calculated by utilizing the direct medical education cost per diems that were in effect on June 30, 1993. The adjusted direct medical education cost per diem will be rank ordered for all hospitals reporting such costs within each peer group, and capped at the 80th percentile. Hospitals will receive a per diem add-on for direct medical education costs in accordance with the methodology described in this emergency amendment.

Estimated annual aggregate inpatient spending resulting from these changes is expected to increase by approximately \$5.9 million.

6) Will these proposed amendments replace emergency amendments currently in effect? Yes

7) Does this rulemaking contain an automatic repeal date? No

8) Do these proposed amendments contain incorporations by reference? No

9) Are there any other proposed amendments pending on this Part? Yes

Sections	Proposed Action	Illinois Register Citation
149.140	Amendment	July 2, 1993 (17 Ill. Reg. 9829)

10) Statement of Statewide Policy Objectives: These proposed amendments do not affect units of local government.

11) Time, Place, and Manner in which Interested Persons may comment on this proposed rulemaking: Any interested parties may submit comments, data, views, or arguments concerning this proposed rulemaking. All comments must be in writing and should be addressed to Joanne Jones, Bureau of Rules and Regulations, Illinois Department of Public Aid, 100 South Grand

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Ave. E., 3rd Floor, Springfield, Illinois 62762. The Department will consider all written comments it receives within 30 days after the publication of this notice.

Any interested persons may review these amendments at the Department of Public Aid's local offices located in each county (except Cook County). In Cook County, the amendments may be reviewed at the Office of the Director, Illinois Department of Public Aid, 310 South Michigan Avenue, Suite 1700, Chicago, Illinois. The amendments may be reviewed at all offices Monday through Friday from 8:30 A.M. until 5:00 P.M. These copies of the amendments are being made available for review in accordance with federal requirements at 42 CFR 447.205.

These proposed amendments may have an impact on small businesses, small municipalities, and not for profit corporations as defined in Sections 1-75, 1-80 and 1-85 of the Illinois Administrative Procedure Act. These entities may submit comments in writing to the Department at the above address in accordance with the regulatory flexibility provisions in Section 5-30 of the Illinois Administrative Procedure Act. These entities shall indicate their status as small businesses, small municipalities, or not for profit corporations as part of any written comments they submit to the Department.

12) Initial Regulatory Flexibility Analysis:

- A) Date proposed rulemaking was submitted to the Business Assistance Office of the Department of Commerce and Community Affairs:
- B) Types of small businesses affected: Hospitals under the Diagnosis Related Grouping (DRG) Prospective Payment System (PPS)
- C) Reporting, bookkeeping or other procedures required for compliance: None
- D) Types of professional skills necessary for compliance: None

The full text of the Proposed Amendments begins on the next page.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

TITLE 89: SOCIAL SERVICES
CHAPTER I: DEPARTMENT OF PUBLIC AID
SUBCHAPTER d: MEDICAL PROGRAMS

PART 149

DIAGNOSIS RELATED GROUPING (DRG)
PROSPECTIVE PAYMENT SYSTEM (PPS)

Section

- 149.5 Diagnosis Related Grouping (DRG) Prospective Payment System (PPS)
- 149.10 Applicability of Other Provisions
- 149.25 General Provisions
- 149.50 Hospital Services Subject to and Excluded from the DRG Prospective Payment System
- 149.75 Conditions for Payment Under the DRG Prospective Payment System
- 149.100 Basic Methodology for Determining DRG Prospective Payment Rates
- 149.105 Payment For Outlier Cases
- 149.125 Special Treatment of Certain Facilities
- 149.140 Methodology for Determining Primary Care Access Health Care Education Payments
- 149.150 Payments to Hospitals Under the DRG Prospective Payment System
- 149.175 Payments to Contracting Hospitals (Repealed)
- 149.200 Admitting and Clinical Privileges (Repealed)
- 149.205 Inpatient Hospital Care or Services by Non-Contracting Hospitals Eligible for Payment (Repealed)
- 149.225 Payment to Hospitals for Inpatient Services or Care not Provided under the ICARE Program (Repealed)
- 149.250 Contract Monitoring (Repealed)
- 149.275 Transfer of Recipients (Repealed)
- 149.300 Validity of Contracts (Repealed)
- 149.305 Termination of ICARE Contracts (Repealed)
- 149.325 Hospital Services Procurement Advisory Board (Repealed)

AUTHORITY: Implementing Article II of the Illinois Health Finance Reform Act (Ill. Rev. Stat. 1991, ch. 111 1/2, par. 6503-1 et seq.) [20 ILCS 2215/3-1 et seq.] and implementing and authorized by Articles III, IV, V, VI, VII and Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, pars. 3-1 et seq., 4-1 et seq., 5-1 et seq., 6-1 et seq., 7-1 et seq., and 12-13) [305 ILCS 5/3-1 et seq., 5/4-1 et seq., 5/5-1 et seq., 5/6-1 et seq., 5/7-1 et seq., and 5/12-13].

SOURCE: Recodified from 89 Ill. Adm. Code 140.940 thru 140.972 at 12 Ill. Reg. 7401; amended at 12 Ill. Reg. 12095, effective July 15, 1988; amended at 13 Ill. Reg. 554, effective January 1, 1989; amended at 13 Ill. Reg. 15070, effective September 15, 1989; amended at 15 Ill. Reg. 1826, effective January 28, 1991; emergency amendment at 15 Ill. Reg. 16308, effective November 1, 1991, for a maximum of 150 days; amended at 16 Ill. Reg. 6195, effective March

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

27, 1992; emergency amendment at 16 Ill. Reg. 11937, effective July 10, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 14733, effective October 1, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 19868, effective December 7, 1992; amended at 17 Ill. Reg. 3217, effective March 1, 1993; amended at 17 Ill. Reg. _____, effective _____.

NOTE: CAPITALIZATION DENOTES STATUTORY LANGUAGE.

Section 149.5 Diagnosis Related Grouping (DRG) Prospective Payment System (PPS)

a) Sections 149.25 through 149.150 describe:

- a)1) The basis of payment for inpatient hospital services under the DRG PPS and sets set forth the general basis for the system;
- a)2) Classifications of hospitals that are included and excluded from the DRG PPS and the requirements governing inclusion or exclusion of hospitals in the system as a result of changes in their classification;

- a)3) Conditions that must be met for a hospital to receive payment under the DRG PPS;

- a)4) The methodology by which DRG prospective rates are determined;

- a)5) The methodology for determining additional payments for outlier cases;

- a)6) The rules for special treatment of certain facilities; and

- a)7) The types, amounts and methods of payment to hospitals under the DRG PPS.

- a)8) Notwithstanding any other provisions of this Part, reimbursement to hospitals for services provided July 1, 1992 through September 30, 1992, October 1, 1992, through March 31, 1994, shall be as follows:

- 1) Base Inpatient Payment Rate. For inpatient hospital services rendered, or, if applicable, for inpatient hospital admissions occurring, on and after July 1, 1992, October 1, 1992, and on or before September 30, 1992, March 31, 1994, the Department shall reimburse hospitals for inpatient services under the reimbursement methodologies in effect for each hospital, and at the base inpatient payment rate calculated for each hospital, as of June 30, 1992 June 30, 1993. The term "base inpatient

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.5(b)(1) (continued)

payment rate" shall include the reimbursement rates calculated effective October 1, 1992, under Part 149.

- 2) Exceptions. The provisions of subsection (b)(1) above shall not apply to:

- A) Hospitals reimbursed under 89 Ill. Adm. Code 148.82, 148.160, or 148.170. Reimbursement for such hospitals shall be in accordance with 89 Ill. Adm. Code 148.82, 148.160, or 148.170, as applicable.

- B) Hospitals reclassified as rural hospitals as described in 89 Ill. Adm. Code 148.40(f)(4). Reimbursement for such hospitals shall be in accordance with 89 Ill. Adm. Code 148.40(f)(4) and 148.260, or Section 149.100(c)(1)(A), whichever is applicable.

- C) The inpatient payment adjustments described in 89 Ill. Adm. Code 148.120, 148.150, and 148.290. Reimbursement for such inpatient payment adjustments shall be in accordance with 89 Ill. Adm. Code 148.120, 148.150, and 148.290, and shall be in addition to the base inpatient payment rate described in subsection (b)(1) above.

- 3) For the purpose of calculating the inpatient payment rate for each hospital eligible to receive quarterly payment adjustments for targeted access and critical care, as defined by the Department on June 30, 1992, the payment adjustment for the period July 1, 1992 through September 30, 1992, shall be 25 percent of the annual adjustment calculated for each eligible hospital as of June 30, 1992.

- 3) For the purpose of calculating the inpatient payment rate for each hospital eligible to receive quarterly payment adjustments for uncompensated care, as defined by the Department on June 30, 1992, the payment adjustment for the period August 1, 1992 through September 30, 1992, shall be one-sixth of the total uncompensated care payment adjustment calculated for each eligible hospital for the uncompensated care rate year, as defined by the Department, ending on July 31, 1992.

c) Definitions

Unless specifically stated otherwise, the definitions of terms used in this Part are as follows:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.5(c) (continued)

1) "DRG grouper" means:

A) For the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A), the HCFA Medicare DRG grouper in effect on September 1, 1992, adjusted for differences in Medicare and Medicaid policies and populations, as described in Section 149.100(a)(1).

B) For the rate periods described in 89 Ill. Adm. Code 148.25(g)(2)(B), the HCFA Medicare DRG grouper which is in effect 90 days prior to the date of admission, adjusted for differences in Medicare and Medicaid policies and populations, as described in Section 149.100(a)(1).

2) "Medicare weighting factor" means:

A) For the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A), the Medicare DRG weighting factors in effect on September 1, 1992, adjusted for differences in Medicare and Medicaid policies and populations, as described in Section 149.100(a)(2).

B) For the rate periods described in 89 Ill. Adm. Code 148.25(g)(2)(B), the Medicare DRG weighting factors in effect 90 days prior to the date of admission, adjusted for differences in Medicare and Medicaid policies and populations, as described in Section 149.100(a)(2).

3) "PPS Pricer" means:

A) For the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A), the HCFA Medicare PPS Pricer, Version 92.0.

B) For the rate periods described in 89 Ill. Adm. Code 148.25(g)(2)(B), the HCFA Medicare PPS Pricer version that is in effect 90 days prior to the date of admission.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 149.10 Applicability of Other Provisions

The following provisions, in addition to those provisions specifically cited in this Part, shall apply to hospitals reimbursed under the DRG PPS:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.10 (continued)

a) Participation, as described in 89 Ill. Adm. Code 148.20.

b) Definitions and Applicability, as described in 89 Ill. Adm. Code 148.25.

b)c) General requirements, as described in 89 Ill. Adm. Code 148.30.

e)d) Special requirements, as described in 89 Ill. Adm. Code 148.40.

e)e) Covered hospital services, as described in 89 Ill. Adm. Code 148.50.

e)f) Services not covered as hospital services, as described in 89 Ill. Adm. Code 148.60.

f)g) Limitations on hospital services, as described in 89 Ill. Adm. Code 148.70.

g)h) Hospital outpatient and hospital-based clinic services, as described in 89 Ill. Adm. Code 148.140.

h)i) Payment for pre-operative days, patient specific orders, and services which can be performed in an outpatient setting, as described in 89 Ill. Adm. Code 148.180.

i)j) Copayments, as described in 89 Ill. Adm. Code 148.190.

j)k) Filing cost reports, as described in 89 Ill. Adm. Code 148.210.

k)l) Review procedure, as described in 89 Ill. Adm. Code 148.310.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 149.25 General Provisions

a) Basis of Payment

1) Payment on a Per Discharge Basis

A) Under the DRG PPS, hospitals are paid a predetermined amount per discharge for inpatient hospital services furnished to persons receiving coverage under the Medicaid Program.

B) The DRG prospective payment rate for each discharge (as

NOTICE OF PROPOSED AMENDMENTS

Section 149.25(a)(1)(B) (continued)

defined in subsection (b) below) is determined according to the methodology described in Sections 149.100 and 149.150, as appropriate. An additional payment is made, in accordance with Sections 149.105, 149.125 and 149.140, as appropriate. The rates paid shall be those in effect on the date of admission.

2) Payment in Full

(A) The DRG prospective payment amount paid for inpatient hospital services is the total Medicaid payment for the inpatient operating costs (as described in subsection (a)(3) below) incurred in furnishing services covered under the Medicaid Program.

B) Except as provided for in subsection (b) below, the full DRG prospective payment amount, as determined under Sections 149.100 and 149.150, as appropriate, is made for each stay during which there is at least one Medicaid eligible day of care.

3) Inpatient Operating Costs. The DRG PPS provides a payment amount for inpatient operating costs, including:

- A) Operating costs for routine services (as described in 42 CFR 413.53(b), revised as of September 1, 1990), such as the costs of room, board, and routine nursing services;
- B) Operating costs for ancillary services, such as radiology and laboratory services furnished to hospital inpatients;
- C) Special care unit operating costs (intensive care type unit services as described in 42 CFR 413.53(b), revised as of September 1, 1990); and
- D) Malpractice insurance costs related to services furnished to inpatients.
- E) Hospital-based physician costs as described in Section 149.75(h)(1)(A).
- 4) Excluded Costs/Services. The following inpatient hospital costs are excluded from the DRG prospective payment amounts:
 - A) Transplant Transplantation costs, including acquisition

NOTICE OF PROPOSED AMENDMENTS

Section 149.25(a)(4)(A) (continued)

costs incurred by approved transplantation centers as described in 89 Ill. Adm. Code 148-80 148.82. Kidney and cornea transplant costs shall be reimbursed under the appropriate methodology described in Sections 149.100 and 149.150 or in 89 Ill. Adm. Code 148.160, 148.170 or 148.250 through 148.300. Kidney acquisition costs shall be reimbursed in accordance with Section 149.150(c)(5).

- B) Costs of psychiatric services incurred by a provider enrolled with the Department to provide those services (category of service 21). Such services shall be reimbursed under 89 Ill. Adm. Code 148.270(b).
- C) Costs of nonemergency psychiatric services incurred by a provider that is not enrolled with the Department to provide those services (category of service 21). Such services shall not be eligible for reimbursement.
- D) Costs of emergency psychiatric services exceeding the maximum of three days emergency treatment incurred by a provider that is not enrolled with the Department to provide those services (DRGs 424-432). Such services exceeding the maximum of 3 three days shall not be eligible for reimbursement.
- E) Costs of physical rehabilitation services incurred by a provider enrolled with the Department to provide those services (category of service 22). Such services shall be reimbursed under 89 Ill. Adm. Code 148.270(b).
- F) Costs of rehabilitation for drug and alcohol abuse (DRG 436 and that part of DRG 437 apportioned to rehabilitation). Such services shall be reimbursed under 89 Ill. Adm. Code 148.340 through 148.390.
- 5) Additional Payments to Hospitals. In addition to payments based on the DRG prospective payment rates, hospitals will receive payments for the following:
 - A) Atypically long or extraordinarily costly (outlier) case cases, as described in Section 149.105.
 - B) Certain costs excluded from the prospective payment rate under subsection (a)(4) above.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.25(a)(5) (continued)

- C) The cost of serving a disproportionately high share of low income patients (as defined and determined in Section 149.125 149.125(a)(2)).
 - D) Uncompensated care costs (as defined and determined in Section 149.125 149.125(a)(3)).
 - E) Trauma-center-costs Specific inpatient payment adjustments (as defined and determined in Section 149.125 149.125(a)(4)).
 - F) Health care education payments (as defined and determined in Section 149.140).
 - G) Certified registered nurse anesthetist (CRNA) costs in accordance with Section 149.150(c)(3).
 - H) Kidney acquisition costs in accordance with Section 149.150(c)(5).
- b) Discharges and Transfers

- 1) Discharges. A hospital inpatient is considered discharged when any of the following occurs:

- A) The patient is formally released from the hospital, except when the patient is transferred to another hospital or a distinct part unit as described in Section 149.50(d) (see subsection (b)(2) below).
- B) The patient dies in the hospital.

- 2) Transfers. A hospital inpatient is considered transferred when the patient is placed in the care of another hospital or a distinct part unit as described in Section 149.50(d).

- 3) Payment in Full to the Discharging Hospital. The hospital discharging an inpatient (subsection (b)(1)(A) above) is paid in full, in accordance with subsection (a)(2) above, unless the discharging hospital or distinct part unit is excluded from the DRG PPS as described in Section 149.50(b), (c) and (d). In the event the discharging hospital or distinct part unit is excluded or exempted from the DRG PPS, that hospital or distinct part unit shall receive payment in full in accordance with 89 Ill. Adm. Code 148.160, 148.170 or 148.250 through 148.300.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.25(b) (continued)

- 4) Payment to a Hospital Transferring an Inpatient to Another Hospital or Distinct Part Unit
- A) A hospital reimbursed under the DRG PPS that transfers an inpatient, under the circumstances described in subsection (b)(2), is paid a per diem rate for each day of the patient's stay in that hospital but the total reimbursement shall not exceed the amount that would have been paid under Section 149.100 if the patient had been discharged. The per diem rate is determined by dividing the appropriate prospective payment rate (as determined under Section 149.100) by the geometric length of stay for the specific DRG to which the case is classified.
- B) Except, if a discharge is classified into DRGs 385 or 985 (neonates, died or transferred to another acute care facility) or DRG 456 (burns, transferred to another acute care facility), and the hospital is reimbursed under the DRG PPS, the transferring hospital is paid in accordance with subsection (a)(2).
- C) A transferring hospital reimbursed under the DRG PPS may qualify for an additional payment for extraordinarily high cost cases that meet the criteria for cost outliers as described in Section 149.105.
- D) A hospital or distinct part unit excluded from the DRG PPS, as described in Section 149.50(b), (c) or (d), that transfers an inpatient under the circumstances described in subsection (b)(2) of this Section, is reimbursed in accordance with 89 Ill. Adm. Code 148.160, 148.170 or 148.250 through 148.300.
- c) Admissions Prior to September 1, 1991. With respect to admissions prior to September 1, 1991, hospitals will receive their per diem reimbursement rate that was in effect July 1, 1991, for each covered day of care provided through the discharge of the patient.
- d) DRG Classification System
- 1) For-rate-periods beginning on or after October 1, 1992, the Department will utilize the DRG Groupers, as described in Section 149.5(c)(1). HCFA-Medicare-grouper, Version-9-0, modified to handle additional DRGs and revised ICD-9-CM codes, as defined by the Department, to place claims into DRG payment classifications.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.25(d)(1) (continued)

- 2) The Department will define additional DRGs that, for hospitals designated as Level III perinatal centers by the Illinois Department of Public Health, replace DRG 385 (neonates, died or transferred to another acute care facility), DRG 386 (extreme immaturity or respiratory distress syndrome, neonate), DRG 387 (prematurity with major problems) and DRG 389 (full term neonate with major problems).

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 149.50 Hospital Services Subject to and Excluded from the DRG Prospective Payment System

- a) Hospital Services Subject to the DRG Prospective Payment System
- 1) Except for services described in Section 149.25(a)(4) and subsection (b)(2) below, all covered inpatient hospital services furnished to persons receiving coverage under the Medicaid Program are paid for under the DRG PPS.
 - 2) Inpatient hospital services will not be paid for under the DRG PPS under any of the following circumstances:
 - A) The services are furnished by a hospital (or distinct part hospital unit) explicitly excluded from the DRG PPS under subsections (c) through (d).
 - B) The services are furnished by a nonparticipating out-of-state hospital (as described in subsection (c)(5)).
 - C) The services are furnished by a hospital that elects to be reimbursed under special arrangements (as described in subsection (c)(6)) in the transition period of DRG PPS implementation.
 - D) The services are furnished by a sole community hospital (as defined in Section 149.125(b)) that has elected to be exempted from the DRG PPS in accordance with subsection (c)(7).
 - E) The payment for services is covered by a health maintenance organization (HMO).
 - b) Excluded and Exempted Hospitals and Hospital Units: General Rules

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.50(b) (continued)

- 1) Criteria. A hospital will be excluded from the DRG PPS if it meets the criteria for one or more of the classifications described in subsection (c) below.
- 2) Alternate Reimbursement System. All excluded hospitals (and excluded distinct part hospital units, as described in subsection (d) below) are reimbursed under the Alternate Reimbursement Systems set forth in 89 Ill. Adm. Code 148.250 through 148.300 with the exception of those hospitals described in subsection (c)(8). The hospitals described in subsection (c)(8) are reimbursed in accordance with 89 Ill. Adm. Code 148.160 or 148.170, as appropriate.
- c) Excluded Hospitals: Classifications. Hospitals that meet the requirements for the classifications set forth in this Section may not be reimbursed under the DRG Prospective Payment System.
 - 1) Psychiatric Hospitals. A psychiatric hospital must:
 - A) Be primarily engaged in providing, by or under the supervision of psychiatrist, psychiatric services for the diagnosis and treatment of mentally ill persons; and
 - B) Be enrolled with the Department as a psychiatric hospital to provide inpatient psychiatric services (category of service 21) and have a Provider Agreement to participate in the Medicaid Program.
 - 2) Rehabilitation Hospitals. A rehabilitation hospital must:
 - A) Hold a valid license as a physical rehabilitation hospital; and
 - B) Be enrolled with the Department as a rehabilitation hospital to provide inpatient rehabilitation services (category of service 22) and have a Provider Agreement to participate in the Medicaid Program.
 - 3) Children's Hospitals. A children's hospital must:
 - A) Be engaged in furnishing services to inpatients who are predominantly individuals under 18 years of age. Be a hospital devoted exclusively to caring for children. A hospital which includes a facility devoted exclusively to caring for children that is separately licensed as a

Section 149.50(c)(3)(A) (continued)

hospital by a municipality shall be considered a children's hospital to the degree that the hospital's Medicaid care is provided to children; and

- B) Have a Provider Agreement to participate in the Medicaid Program.

- 4) Long Term Stay Hospitals. A long term stay hospital must:

- A) Not be a psychiatric hospital, as described in subsection (c)(1) above, a rehabilitation hospital as described in subsection (c)(2) above, or a children's hospital as described in subsection (c)(3) above and must have an average length of inpatient stay greater than 25 days: as computed by dividing the number of total inpatient days (less leave or pass days) by the number of total discharges for the most recent State fiscal year (i.e., Fiscal-Year 1991-for-Fiscal-Year-1992-payments) for which complete information is available; and

- B) Have a Provider Agreement to participate in the Medicaid Program.

- 5) Hospitals Outside of Illinois that are Exempt from Cost Reporting Requirements. A hospital is excluded from the DRG PPS if it meets the following definition: a nonparticipating out-of-state hospital is a hospital from out-of-state an out-of-state hospital that provides fewer than 100 Illinois Medicaid days annually, that does not elect to be reimbursed under this Part (the DRG Prospective Payment System), and that does not file an Illinois Medicaid cost report.

- 6) Hospitals Reimbursed Under Special Arrangements. Hospitals that, on August 31, 1991, had a contract with the Department under the ICARE Program, pursuant to Section 3-4 of the Illinois Health Finance Reform Act, may elect to continue to be reimbursed at rates stated in such contracts for general and specialty care for services provided on or after September 1, 1991, subject to the limitations described in 89 Ill. Adm. Code 148.40(e) through 148.40(g) 148.40(f) through 148.40(h).

- 7) Sole Community Hospitals. Hospitals described in Section 149.125(b), which have elected to be exempted from the DRG PPS, subject to the limitations described in 89 Ill. Adm. Code 148.40(e) through 148.40(g) 148.40(f) through 148.40(h).

Section 149.50(c) (continued)

- 8) County-Owned Hospitals and State-Owned Hospitals. County-owned hospitals and State-owned hospitals located in an Illinois county with a population greater than three million are excluded from the DRG system and are reimbursed under unique hospital-specific reimbursement methodologies as described in 89 Ill. Adm. Code 148.160 and 148.170.

- d) Excluded Distinct Part Hospital Units.

- 1) Distinct Part Psychiatric Units. With the exception of those hospitals described in subsections (c)(1) through (c)(8), a hospital enrolled with the Department to provide inpatient psychiatric services (category of service 21) shall be excluded from the DRG PPS for the reimbursement of such inpatient psychiatric services and shall be reimbursed in accordance with 89 Ill. Adm. Code 148.270(b).

- 2) Distinct Part Rehabilitation Units. With the exception of those hospitals described in subsections (c)(1) through (c)(8), a hospital enrolled with the Department to provide inpatient rehabilitation services (category of service 22) shall be excluded from the DRG PPS for the reimbursement of such inpatient rehabilitation services and shall be reimbursed in accordance with 89 Ill. Adm. Code 148.270(b).

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 149.75 Conditions for Payment Under the DRG Prospective Payment System

- a) General Requirements

- 1) A hospital must meet the conditions of this Section to receive payment under the DRG PPS for inpatient hospital services furnished to persons receiving coverage under the Medicaid Program.
- 2) If a hospital fails to comply fully with these conditions with respect to inpatient hospital services furnished to one or more Medicaid clients, the Department may, as appropriate:
- A) Withhold Medicaid payment (in full or in part) to the hospital until the hospital provides adequate assurances of compliance; or

DEPARTMENT OF PUBLIC AID

93

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

NOTICE OF PROPOSED AMENDMENTS

Section 149.75(a)(2) (continued)

Section 149.75(d)(1) (continued)

B) Terminate the hospital's Provider Agreement.

- b) Hospital Utilization Control. Hospitals and distinct part units that participate in Medicare (Title XVIII) must use the same utilization review standards and procedures and review committee for Medicaid as they use for Medicare. Hospitals and distinct part units that do not participate in Medicare (Title XVIII) must meet the utilization review plan requirements in 42 CFR, Ch. IV, Part 456, Subparts C, D, or E (October 1, 1991). Utilization control requirements for inpatient psychiatric hospital care in a psychiatric hospital, as defined in Section 149.50(c)(1), shall be in accordance with federal regulations at 42 CFR, Ch. IV, Part 456, Subpart G (October 1, 1991).

c) Medical Review Requirements: Admissions and Quality Review

Hospital utilization review committees, a subgroup of the utilization review committee, or the hospital's designated professional review organization (PRO) shall review, on an ongoing basis, the following:

- 1) The medical necessity, reasonableness and appropriateness of inpatient hospital admissions and discharges.
- 2) The medical necessity, reasonableness and appropriateness of inpatient hospital care for which additional payment is sought under the outlier provisions of Section 149.105.
- 3) The validity of the hospital's diagnostic and procedural information.
- 4) The completeness, adequacy and quality of the services furnished in the hospital.
- 5) Other medical or other practices with respect to program participants or billing for services furnished to program participants.

d) Medical Review Requirements: DRG Validation

- 1) Physician attestation. Beginning with admissions on or after September 1, 1991, for which the discharge occurs on or after December 15, 1991, the attending physician must, shortly before, at, or shortly after discharge (but before a claim is submitted), attest to the principal diagnosis, secondary diagnoses, and names of major procedures performed. The information must be in writing in the medical record and, except

as provided in subsection (d)(2) below, the physician must sign the statement. Below the diagnostic and procedural information, and on the same page, the following statement must immediately precede the physician's dated signature: "I certify that the narrative descriptions of the principal and secondary diagnoses and the major procedures performed are accurate and complete to the best of my knowledge." The physician's name must be typed or clearly printed and appear on the same page as the physician's signature.

- 2) Alternative signature requirement. The attending physician's signature, along with the other information required in subsection (d)(1), may be provided by electronic means through a hospital data system if the hospital's Title XVIII (Medicare) intermediary has determined that the hospital data system meets the guidelines established by the Health Care Financing Administration, U.S. Department of Health and Human Services, under the Medicare Program.

- 3) DRG Validation. The Department or its designee may require and perform prepayment review and/or postpayment review of specific diagnosis and procedure codes.

4) Sample Reviews

- A) The Department, or its designee, may review a random sample of discharges to verify that the diagnostic and procedural coding, submitted by the hospital and used by the Department for DRG assignment, is substantiated by the corresponding medical records.

- B) Code validation must be done on the basis of a review of medical records and, at the Department's discretion, may take place at the hospital or away from the hospital site.

5) Revision of Coding

- A) If the diagnostic and procedural information, attested to by the attending physician, is found to be inconsistent with the hospital's coding, the hospital shall be required to provide the appropriate coding and the Department shall recalculate the payment on the basis of the revised coding.
- B) If the information attested to by the physician as stipulated under subsection (d)(5)(A) is found not to be

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.75(d)(5)(B) (continued)

consistent with the medical record, the hospital shall be required to provide the appropriate coding and the Department shall recalculate the payment on the basis of the revised coding.

e) Medical Review Requirements: The Department, or its designee, may conduct pre-admission, concurrent, pre-payment, and/or post-payment reviews of:

- 1) The medical necessity, reasonableness and appropriateness of inpatient hospital admissions and discharges.
- 2) The quality and/or the nature of the utilization of health services.
- 3) The medical necessity, reasonableness and appropriateness of inpatient hospital care for which additional payment is sought under the outlier provisions of Section 149.105.
- 4) The validity of the hospital's diagnostic and procedural information.
- 5) The completeness, adequacy and quality of the services furnished in the hospital.
- 6) Other medical or other practices with respect to program participants or billing for services furnished to program participants.

f) Hospitals shall be notified at least thirty (30) days in advance of any pre-admission, concurrent, or pre-payment review requirements imposed by the Department.

g) Denial of Payment as a Result of Admissions, Length of Stay, Transfers and Quality Review

- 1) If the Department determines that a hospital has misrepresented admissions, length of stay, discharges, or billing information, or has taken an action that results in the unnecessary admission or inappropriate discharge of a program participant, unnecessary multiple admissions of a program participant, unnecessary transfer of a program participant, or other inappropriate medical or other practices with respect to program participants or billing for services furnished to program participants, the Department may, as appropriate:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.75(g)(1) (continued)

A) Deny payment (in whole or in part) with respect to inpatient hospital services provided with respect to such an unnecessary admission, inappropriate length of stay or discharge, subsequent readmission or transfer of an individual.

B) Require the hospital to take action necessary to prevent or correct the inappropriate practice.

C) Perform prepayment review in accordance with 89 Ill. Adm. Code 148.240(c) 148.240(a).

2) When payment with respect to the discharge of an individual patient is denied by the Department, or its designee, under subsection (g)(1)(A), a reconsideration will be provided within 30 days, upon the request of a practitioner or provider, if such request is the result of the designee's own medical necessity or appropriateness of care denial determination and is received within 60 days of the Advisory Notice. The date of the Advisory Notice is counted as day one.

3) A determination under subsection (g)(1) above, if it is related to a pattern of inappropriate admissions, length of stay and billing practices that has the effect of circumventing the prospective payment system, may result in actions specified in subsection (a)(2) above.

h) Furnishing of Inpatient Hospital Services Directly or Under Other Arrangements

1) The applicable payments made under the PPS are payment in full for all inpatient hospital services other than for the services of nonhospital-based physicians to individual program participants and the services of certain hospital-based physicians as described in subsections (h)(1)(B)(i) through (h)(1)(B)(v) below.

A) Hospital-based physicians who may not bill separately on a fee-for-service basis:

- i) A physician whose salary is included in the hospital's cost report for direct patient care may not bill separately on a fee-for-service basis.
- ii) A teaching physician who provides direct patient care

NOTICE OF PROPOSED AMENDMENTS

Section 149.75(h)(1)(A)(ii) (continued)

may not bill separately on a fee-for-service basis if the salary paid to the teaching physician by the hospital or other institution includes a component for treatment services.

B) Hospital-based physicians who may bill separately on a fee-for-service basis:

- i) A physician whose salary is not included in the hospital's cost report for direct patient care may bill separately on a fee-for-service basis.
- ii) A teaching physician who provides direct patient care may bill separately on a fee-for-service basis if the salary paid to the teaching physician by the hospital or other institution does not include a component for treatment services.
- iii) A resident may bill separately on a fee-for-service basis when, by the terms of his or her contract with the hospital, he or she is permitted to and does bill private patients and collect and retain the payments received for those services.
- iv) A hospital-based specialist who is salaried, with the cost of his or her services included in the hospital reimbursement costs, may bill separately on a fee-for-service basis when, by the terms of his or her contract with the hospital, he or she may charge for professional services and do, in fact, bill private patients and collect and retain the payments received.
- v) A physician holding a nonteaching administrative or staff position in a hospital or medical school may bill separately on a fee-for-service basis to the extent that he or she maintains a private practice and bills private patients and collects and retains payments made.

- 2) Charges are to be submitted on a fee-for-service basis only when the physician seeking reimbursement has been personally involved in the services being provided. In the case of surgery, it means presence in the operating room, performing or supervising the major phases of the operation, with full and immediate

NOTICE OF PROPOSED AMENDMENTS

Section 149.75(h)(2) (continued)

responsibility for all actions performed as a part of the surgical treatment.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 149.100 Basic Methodology for Determining DRG Prospective Payment Rates

a) DRG Classification and Weighting Factors

- 1) DRG Classification. For the rate period beginning October 1, 1992, the Department will utilize the DRG Group, as described in Section 149.5(c)(1), to classify classification of inpatient hospital discharges by diagnosis related groups (DRGs) as defined by federal regulation for the Medicare Program (42 CFR 412) in effect on September 1, 1992, with modifications deemed appropriate due to the differences in the Medicare and Medicaid patient populations and Illinois Medicaid policy.

- 2) DRG Weighting Factors

- A) Except as provided in subsections (a)(2)(B) through (a)(2)(E) below, the Illinois Medicaid weighting factor for each DRG shall equal the Medicare weighting factor, as described in Section 149.5(c)(2), for that group, in effect on September 1, 1992, multiplied by a fraction, the numerator of which is the Medicaid geometric mean length of stay and the denominator of which is the Medicare geometric mean length of stay for that group. In making that calculation, the Department shall:
 - i) Use the Medicare geometric mean length of stay for each diagnostic related group as determined by the Health Care Financing Administration of the United States Department of Health and Human Services.
 - ii) Calculate the Medicaid geometric mean length of stay for each diagnostic related group using the same methodology employed to calculate the Medicare geometric mean length of stay and using data obtained from the Illinois Health Care Cost Containment Council or the Department's data bases.
- B) The Illinois weighting factors for neonatal discharges

NOTICE OF PROPOSED AMENDMENTS

Section 149.100(a)(2)(B) (continued)

(Medicare-defined DRGs 385-391 and Illinois-defined DRGs for Level III perinatal centers) shall be the product of the ratio of the mean cost per discharge (defined below) of the given DRG to the mean cost per discharge for DRG 391 (normal newborn) and the Medicare scaling factor (defined below), such that the Illinois and Medicare weighting factors for DRG 391 are the same.

i) Mean cost per discharge, for any DRG, is defined as the sum of the product of charges, as reported by a hospital on claims paid by the Department, less costs listed as otherwise reimbursed under Section 149.150(c), updated to the current rate year using the national hospital market basket price proxies (DRI) DRI-factors-(defined-in-89-111-Adm-Code-148-270), and the hospital's cost to charge ratio, as derived from the hospital's most recent audited base-year cost report (e.g., Calendar-Year-1989-for-Fiscal-Year 1992), divided by the number of discharges for that DRG.

ii) Medicare scaling factor is defined as the Medicare weighting factor for DRG 391 (normal newborns).

C) The Illinois weighting factors for psychiatric discharges (DRGs 424-432) shall be computed as specified in subsections (a)(1) and (a)(2) except, prior to computing the Medicaid geometric mean length of stay for those DRGs, all lengths of stay longer than three (3) days are to be set at three (3) days.

D) The Illinois weighting factors for DRGs that will not be paid through the DRG PPS are zero (0.0000). Those include DRG 103, heart transplant; DRG 436, alcohol/drug dependence with rehabilitation therapy; DRG 462, rehabilitation; DRG 480, liver transplant; DRG 481, bone marrow transplant.

E) Except for DRGs otherwise specified in subsections (a)(2)(B) through (a)(2)(D), the Illinois weighting factors for DRGs for which available historic discharge data are sparse, fewer than 100 records, shall be computed using an alternate methodology.

i) For rate periods the rate-period beginning on or after October 1, 1992, for those DRGs with 32 or more

NOTICE OF PROPOSED AMENDMENTS

Section 149.100(a)(2)(E)(i) (continued)

records available, the Illinois weighting factor shall be set at the midpoint between the weight calculated using the methodology in subsection (a)(2)(A) and the Medicare weighting factor, as described in Section 149.5(c)(2) in-effect-on-September-1, 1992.

ii) For those DRGs with fewer than 32 records available, the Illinois weighting factor shall be set equivalent to the Medicare weighting factor, as described in Section 149.5(c)(2) in-effect-on-September-1, 1992.

3) Assignment of Discharges to DRGs. The Department will establish a methodology for classifying specific hospital discharges within DRGs which ensures that each hospital discharge is appropriately assigned to a single DRG, based on essential data abstracted from the inpatient bill for that discharge.

A) The classification of a particular discharge will, as appropriate, be based on the patient's age, sex, principal diagnosis (that is, the diagnosis established after study to be chiefly responsible for causing the patient's admission to the hospital), secondary diagnoses, procedures performed, and discharge status.

B) Each discharge will be assigned to only one DRG (related, except as provided in subsection (a)(3)(C), to the patient's principal diagnosis) regardless of the number of conditions treated or services furnished during the patient's stay.

C) When the discharge data submitted by a hospital show a surgical procedure unrelated to a patient's principal diagnosis, the bill will be subject to prepayment review for validation and reverification. The Department's DRG classification system will provide a DRG, and an appropriate weighting factor, for cases for which the unrelated diagnosis and procedure are confirmed.

4) Review of DRG Assignment

A) A hospital has 60 days after the date of the remittance advice indicating initial assignment of a discharge to a DRG to request a review of the assignment. The hospital may submit additional information as a part of its request.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.100(a)(4) (continued)

B) The Department shall review the hospital's request and any additional information and decide whether a change in the DRG assignment is appropriate. If the Department decides that a higher-weighted DRG should be assigned, it must request the Department's peer review organization to review the case to verify the change in DRG assignment.

C) Following the 60-day period described in subsection (a)(4)(A) above, the hospital may not submit additional information with respect to the DRG assignment or otherwise revise its claim.

b) Illinois Rates for Admissions on or after October 1, 1992

1) Reimbursement to hospitals for claims for admissions occurring prior to October 1, 1992, shall be calculated and paid in accordance with the statutes and administrative rules governing the time period when the services were rendered. The payments described in Sections 149.5 through 149.150 149.325 and 89 Ill. Adm. Code 148.250 through 148.300 shall be effective for admissions on and after October 1, 1992, subject to 89 Ill. Adm. Code 148.20(b) and Section 149.5(b).

2) The payments described in 89 Ill. Adm. Code 148.82 148.80 shall be effective for services provided on or after July 1, 1992.

c) Determining Prospective Payment Rates.

1) Federal/Regional Blended Rate Per Discharge

A) For the rate period beginning October 1, 1992, except as specified in subsection (c)(1)(B) below, the Department shall reimburse hospitals for inpatient services at the federal/regional blended rate per discharge for the Medicare Program, which includes the hospital-specific portion as described in subsection (c)(2) below, if applicable, in effect on September 1, 1992, and as computed by the PPS Pricer, as described in Section 149.5(c)(3) Version 92.0.

B) In the case of a hospital that was not determined by the Department to be a rural hospital at the beginning of the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A), but was subsequently reclassified by the Department as a rural hospital, as described in 89 Ill. Adm. Code 148.25(g)(3), on July 15, 1993:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.100(c)(1)(B) (continued)

ii) Effective with admissions occurring on October 1, 1993, and for the duration of the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A), the Department shall recompute such hospital's DRG PPS payment rate using the rural hospital federal/regional, rural wage adjusted, blended rate per discharge in effect on September 1, 1992, under the Medicare Program.

iii) Effective with admissions occurring on or after the rate periods described in 89 Ill. Adm. Code 148.25(g)(2)(B), the Department shall compute such hospital's DRG PPS payment rate using the rural hospital federal/regional, rural wage adjusted, blended rate per discharge in effect 90 days prior to the date of admission, under the Medicare Program.

2) Hospital-Specific Portion

The hospital-specific portion is defined as the specific status and any applicable add-ons under the Medicare Program in recognition of sole community hospitals, rural referral centers, Medicare dependent hospitals, and rural hospitals deemed urban.

3) DRG PPS Base Rate

The DRG PPS base rate shall be defined as the sum of the amounts computed under subsections (c)(1) and (c)(2), multiplied by the Illinois weighting factor assigned to the DRG into which the case has been classified.

4) Payment Adjustments

In addition to the DRG PPS base rate defined in subsection (c)(3), hospitals shall receive applicable outlier adjustments, in accordance with Section 149.105; applicable adjustments a-per case-add-on for health care education payments, in accordance with Section 149.140; applicable adjustments per-case-add-ons for indirect medical education costs, capital costs, direct medical education costs, and CRNA costs in accordance with Section 149.150(c); applicable adjustments for disproportionate share, in accordance with 89 Ill. Adm. Code Section 148.120; applicable adjustments for uncompensated care, in accordance with 89 Ill. Adm. Code Section 148.150; various specific inpatient payment adjustments, as applicable adjustments-for trauma-admissions, in accordance with 89 Ill. Adm. Code Section

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.100(c)(4) (continued)

148.290 148-190; and, on a retrospective basis, any applicable adjustment for kidney acquisition costs in accordance with Section 149.150(c)(5).

d) Application of Upper Payment Limits.

The Department shall adjust each of the prospective payment rates determined under subsection (c) above (with the exception of disproportionate share payment adjustments made in accordance with 89 Ill. Adm. Code 148.120) to ensure that aggregate payments do not exceed the amount that can reasonably be estimated would have been paid under Medicare payment principles, in compliance with 42 CFR 447.272, Application of Upper Payment Limits.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 149.105 Payment For Outlier Cases

a) General Provisions

1) Basic-Rate

A) Except as provided in subsections (a)(3) and (a)(4) of this Section subsections (a)(1)(B) and (a)(1)(C), the Department provides for additional payment, approximating a hospital's marginal cost of care beyond thresholds specified by the Department, to a hospital for covered inpatient hospital services furnished to a Medicaid client, if either of the following conditions in the following subsections (A) or (B) apply:

i) The client's length of stay (including up to three administrative days) exceeds the day outlier threshold, determined by the Department, for the appropriate applicable DRG.

A) For the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A), the threshold is set at the lesser of the geometric mean length of stay plus 27 days, or the geometric mean length of stay plus three (3) standard deviations.

B) For rate periods described in 89 Ill. Adm. Code 148.25(g)(2)(B), the Department shall utilize the geometric

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.105(a)(1)(B) (continued)

mean length of stay plus the lesser of three standard deviations, or the Medicare day outlier cutoff threshold in effect 90 days prior to the date of admission, adjusted by a factor, the numerator of which is the Medicaid geometric length of stay, and the denominator of which is the average Medicare geometric mean length of stay.

2)i) The hospital's charges for covered services furnished to the client, adjusted to cost by applying a cost-to-charge ratio, as described in subsection (c)(3) of this Section, exceed the greater of:

A) For the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A), \$34,000 as adjusted for the hospital's labor market, or the hospital's DRG PPS base rate as described in Section 149.100(b)(2)(C) multiplied by two (2).

B) For the rate periods described in 89 Ill. Adm. Code 148.25(g)(2)(B), the Department shall utilize the Medicare established cost outlier cutoff threshold in effect 90 days prior to the date of admission. The Medicare outlier threshold shall be adjusted by a factor, the numerator of which is the Medicaid geometric length of stay, and the denominator of which is the Medicare geometric mean length of stay.

3)B) The Department will provide cost outlier payments to a transferring hospital reimbursed under the DRG PPS that does not receive payment under subsection (b) of this Section for discharges specified in Section 149.25(b)(4)(B), if the hospital's charges for covered services furnished to the client, adjusted to cost by applying a cost-to-charge ratio, as described in subsection (c)(3), exceed:

A) For the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A), the greater of the criteria specified in subsection (a)(2)(A) of this Section (a)(1)(A) and (a)(1)(B).

B) For the rate periods described in 89 Ill. Adm. Code 148.25(g)(2)(B), the criteria specified in subsection (a)(2)(B) of this Section.

4)C) The Department will not provide outlier payments for:

A)i) Discharges classified as psychiatric care (DRGs 424-432).

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.105(a)(4)(A) (continued)

Such care provided by other than hospitals or distinct part units enrolled with the Department to provide psychiatric care (category of service 21) is limited to emergency treatment, to last no longer than three days.

B) Discharges assigned to DRGs with an Illinois weighting factor of zero (0.0000).

5) The Department or its designee may review outlier cases on a prepayment or postpayment review basis. The charges for any services identified as noncovered through this review will be denied and any outlier payment having been made for those services will be recovered, as appropriate, after a determination as to the provider's liability has been made. If the Department or its designee finds a pattern of inappropriate utilization by a hospital, all outlier cases from that hospital are subject to medical review, and this review may be conducted prior to payment until the Department or its designee determines that appropriate corrective actions have been taken. The Department, or its designee, must review and approve, to the extent required by the Department:

- A) The admission was medically necessary and appropriate.
 - B) The medical necessity and appropriateness of the admission and outlier services in the context of the entire stay.
 - C) The services were ordered by the physician, actually furnished, and nonduplicatively billed.
 - D) The validity of the diagnostic and procedural coding.
 - E) The granting of up to three administrative (grace) days during which the hospital is seeking an appropriate setting into which to discharge a nonacute patient.
- b) Payment for Extended Length-of-Stay Cases (Day Outliers)
- 1) If the hospital stay includes covered days of care beyond the applicable threshold criterion, the Department will make an additional payment, on a per diem basis, to the discharging hospital for those days and the transferring hospital for DRG's 385, 456, or 985 only. A special request or submission is not necessary to initiate this payment.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.105(b) (continued)

- 2) Except as provided in subsection (d) subsections (b)(3) or (d) of this Section, and subject to the limitations described in subsection (e) of this Section, the per diem payment made under subsection (b)(1) is derived by first taking 60 percent of the per diem payment for the applicable DRG, as calculated by dividing the DRG PPS base rate, determined under Section 149.100(c)(3), 89-113-Adm., Code 149-100 by the mean length-of-stay for that DRG.
 - 3) The per diem payment made under subsection (b)(1) for a burn discharge (DRGs 456-460) is derived under the provisions of subsection (b)(2), except that the calculation is 90 percent of the per diem payment of the applicable DRG.
 - 3) Any days in a covered stay identified as noncovered reduce the number of days reimbursed at the day outlier rate but not to exceed the number of days that occur after the day outlier threshold.
- c) Payment for Extraordinarily High Cost Cases (Cost Outliers)
- 1) If the hospital charges, as adjusted by the method specified in subsection (c)(3) exceed the applicable threshold criterion, the Department will make an additional payment to the hospital to cover those costs. A special request or submission is not necessary to initiate this payment.
 - 2) The Department will reimburse the cost of the discharge on the billed charges for covered inpatient services, adjusted by a cost-to-charge ratio as described in subsection (c)(3), subject to the limitations described in subsections (c)(4) and (e) of this Section.
 - 3) The cost-to-charge ratio used to adjust covered charges is computed at the beginning of each rate period, as described in 89 Ill. Adm. Code 148.25(g)(2), annually by the Department for each hospital based on the hospital's base fiscal year. Statewide cost-to-charge ratios are used in those instances in which a hospital's cost-to-charge ratio falls outside reasonable parameters or cannot be computed due to a lack of information (e.g., a new hospital for which the Department is not in possession of the required historical information).
 - 4) If any of the services are determined to be noncovered, the charges for those services will be deducted from the requested amount of reimbursement but not to exceed the amount claimed

Section 149.105(c)(4) (continued) above the cost outlier threshold.

- 5) Except as provided in subsection (c)(6), the additional amount is 75 percent of the difference between the hospital's adjusted cost for the discharge (as determined under subsection (c)(3)) and the threshold criteria established under subsection (a)(1)(A)(ii), subject to the limitations described in subsections (c)(4) and (e) of this Section.
- 6) The additional payment amount for burn cases (DRGs 456-460) is computed under the provisions of subsection (c)(5), except that the payment is 90 percent of the difference between the hospital's adjusted cost for the discharge and the threshold criteria.

d) Payment for Extraordinarily High Cost Day Outliers. If a discharge qualifies for an additional payment under the provisions of both subsections (b) and (c), the additional payment is, subject to the limitations described in subsection (e) of this Section, the greater of the following:

- 1) The payment computed under subsection (b) above.
- 2) The payment computed under subsection (c) above.

e) Outlier Payment Limitation. Notwithstanding any other provisions of this Section, the total reimbursement paid by the Department for a claim qualifying for an outlier payment under this Section shall not exceed the total covered inpatient charges.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 149.125 Special Treatment of Certain Facilities

a) General Rules

- 1) Sole Community Hospitals. Hospitals defined as sole community hospitals shall, under subsection (b) below, shall have the choice of being reimbursed under the DRG PPS methodology, as described in Sections 149.5 through 149.150, or the Department's Alternate Reimbursement methodology as described in 89 Ill. Adm. Code 148.250 through 148.300, in accordance with the provisions of 89 Ill. Adm. Code 148.40(f) through (h).

Section 149.125(a) (continued)

- 2) Hospitals that Serve a Disproportionate Share of Low Income Patients. The Department shall make additional payments to hospitals that serve a disproportionate share of low income patients. The criteria and methodologies for such additional payments are set forth in 89 Ill. Adm. Code 148.120 and include applicable additional payments for targeted access-care and critical access-care.
- 3) Uncompensated Care Adjustments. The Department shall make an additional payment to hospitals that provide equal access to low income persons. The criteria and methodology for this additional payment are set forth in 89 Ill. Adm. Code 148.150.
- 4) Specific Inpatient Payment Trauma-Center Adjustments. The Department shall make specific additional payments to applicable hospitals as set forth in 89 Ill. Adm. Code 148.290 148.290(e).

b) Criteria for Classification as a Sole Community Hospital. "Medicaid Sole Community Provider" means a hospital that meets one of the following criteria:

- 1) Medicare Program Designation
 - A) For the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A), any hospital designated as a "sole community provider" by the U.S. Department of Health and Human Services for purposes of reimbursement under the federal Medicare Program effective September 1, 1992, or
 - B) For the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(B), any hospital designated as a "sole community provider" by the U.S. Department of Health and Human Services for purposes of reimbursement under the federal Medicare Program effective 90 days prior to the date of admission.
- 2) Primary Service Area Designation
 - A) Any rural hospital, as described in 89 Ill. Adm. Code 148.25(g)(3), located outside of a metropolitan statistical area that serves 55 percent or more of the Medicaid patients residing within the hospital's primary service area for the provision of inpatient hospital services.

NOTICE OF PROPOSED AMENDMENTS

Section 149.125(b)(2) (continued)

B) "Primary service area" means the geographic area defined by U.S. Postal Service Zip Codes in which 50 percent or more of a hospital's inpatients reside.

C) The determination of sole community provider status under this subsection (b)(2) shall be made prior to the rate period, as described in 89 Ill. Adm. Code 148.25(g)(2).

CVD) The data used to make this determination will be from the Illinois Health Care Cost Containment Council (IHCCC) for the most recent four quarters for which information is available.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 149.140 Methodology for Determining Primary Care Access Health Care Education Payments

a) Payments will be made to qualifying teaching hospitals for the purpose of encouraging medical schools and affiliated teaching hospitals to increase the number and to promote the education of primary health care professionals and the placement of those professionals in areas of the State that suffer a shortage of medical professionals.

b) Definitions.

1) "Full-time equivalent countable resident" means a resident that meets both of the following criteria:

A) A resident that is, as defined by the federal Department of Health and Human Services, allowed to be reported on the Medicare Cost Report when calculating Graduate Medical Education (CME) payments, as of October 1, 1993, and as of the first day of any Medicare rate year subsequent to the rate period in effect as of April 1, 1994.

B) A resident that is, as of October 1, 1993, and as of the first day of any Medicare rate year subsequent to the rate period in effect as of April 1, 1994, in the first, second, third or fourth year of their first residency training program.

2) "Full-time equivalent resident" means, for the rate period

NOTICE OF PROPOSED AMENDMENTS

Section 149.140(b)(2) (continued)

described in 89 Ill. Adm. Code 148.25(g)(2)(A) and for the first subsequent rate period as described in 89 Ill. Adm. Code 148.25(g)(2)(B). Residents, as defined by the federal Department of Health and Human Services, and allowed to be reported on the Medicare cost report on file with the Department for the latest cost report period ending between nineteen-(19) and thirty-(30) months prior to the beginning of the fiscal year in which the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A) begins.

3) "Full-time equivalent qualified rotation" means one full-time equivalent countable resident that works full-time, or its proportional equivalent, in any qualified setting.

4) "Full-time equivalent rotation" means one full-time equivalent countable resident that works full-time, or its proportional equivalent, in any residency location.

5) "Major academic hospital" means:

A) For the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A), and for the first subsequent rate year as described in 89 Ill. Adm. Code 148.25(g)(2)(B), a hospital, located in the State of Illinois, with at least three hundred-fifty-(350) acute care, inpatient beds and at least one-hundred-thirty-(130) full-time equivalent residents. The source of this information on acute-care, inpatient beds will be the most recent available American Hospital Association Guide.

B) For subsequent rate periods not described in subsection (b)(5)(A) above, a hospital, located in the State of Illinois, with at least 350 acute care, inpatient beds and at least 130 full-time equivalent residents. The source of this information will be the most current Illinois Department of Public Health published report entitled "Bed Count, Average Length of Stay, Average Daily Census and Percent Occupancy for Non-Federal Hospitals in Illinois", which is available to the Department sixty days preceding a rate period, as described in 89 Ill. Adm. Code 148.25(g)(2)(B) that is not described in subsection (b)(5)(A) above. Inpatient beds shall include total beds, excluding any used for substance abuse, long term care or swing beds. The source of information on full-time

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.140(b)(5)(B) (continued)

equivalent residents will be the most recent available Medicare Cost Report.

- 6) "Primary care clinic" means any hospital sponsored or affiliated practice site in which at least 50 per centum of patient visits to the clinic are for primary care, or meets one or more of the following criteria:

A) At least 50 per centum of all staff physicians (including salaried, contractual, and part-time) routinely provide obstetric, pediatric, internal medicine, or family practice care in the clinic setting.

B) The clinic enrolls in the Healthy Moms/Healthy Kids program and meets the following criteria:

i) The clinic accepts 1,000 or more pregnant women for obstetrical care through the Healthy Moms/Healthy Kids program between July 1, 1993, and June 30, 1994.

ii) The clinic accepts 1,250 or more pregnant women for obstetrical care through the Healthy Moms/Healthy Kids program between July 1, 1994, and June 30, 1995.

iii) The clinic accepts 1,500 or more pregnant women for obstetrical care through the Healthy Moms/Healthy Kids program between July 1, 1995, and June 30, 1996, and each year thereafter.

C) The clinic enrolls in the Healthy Moms/Healthy Kids program and meets the following criteria:

i) The clinic accepts 3,000 or more women and children for primary care services through the Healthy Moms/Healthy Kids program between July 1, 1993, and June 30, 1994.

ii) The clinic accepts 3,750 or more women and children for primary care services through the Healthy Moms/Healthy Kids program between July 1, 1994, and June 30, 1995.

iii) The clinic accepts 4,500 or more women and children for primary care services through the Healthy Moms/Healthy Kids program between July 1, 1995, and June 30, 1996, and each year thereafter.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.140(b) (continued)

7) A primary care clinic does not include clinics or facilities established for emergency room usage.

8) "Qualified rotation setting" means any of the following:

A) A primary care clinic that meets one of the following criteria: has thirty-five (35) per centum or more of its annual patients eligible for medical assistance.

i) A primary care clinic that has 20 per centum or more of its annual patients eligible for medical assistance.

ii) A primary care clinic that has 25,000 or more of its annual patient visits eligible for medical assistance.

iii) A primary care clinic that has a 5,000 or more of its annual patient visits eligible for medical assistance and a 10 per centum or more increase in its annual patients eligible for medical assistance from one year to the next.

B) A primary care clinic that pledges to serve 500 or more individuals participating in the Department's Healthy Moms/Healthy Kids program.

CB) A federally qualified health center.

CC) A rural health center.

9) "Qualified rotation ratio" means the ratio of the total full-time equivalent qualified rotation to the total full-time equivalent rotation of all countable residents.

10) "Medicare rate year" means any Medicare rate year in effect as defined by the Federal Health Care Finance Authority (HCFA).

c) Initiative Goals. The goals of this initiative are to direct State resources into incentives that will:

1) Increase the number of primary health care professionals trained in community primary care settings.

2) Increase the number of primary health care professionals providing thorough medical services to persons eligible for medical assistance.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.140(c) (continued)

- 3) Decrease the number of non-urgent hospital emergency room visits.
- 4) Promote cooperation among medical schools, major teaching hospitals, and primary care providers to develop programs that will:

- A) Encourage medical students to select primary care specialties.
- B) Establish and staff clinics that are located in medically underserved areas or underserved Medicaid areas.
- C) Promote the use of preventive care.

d) Participation Requirements.

- 1) Major academic hospitals must enroll with the Department to participate in the initiative.
- 2) Hospitals receiving payments under this initiative are to use these payments for the establishment of new programs or the enhancement of existing programs that will place residents in qualified rotation settings and achieve the goals described in subsection (c) above.
- 3) Hospitals receiving payments under this incentive must comply with reporting requirements as described in subsection (f) below.
- e) Payment methodology. For the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A), payments Payments will be made as an add-on for any DRG PPS discharge from a participating hospital. The amount of that payment shall be a per discharge amount which will be the quotient of the hospital-specific incentive level divided by the number of DRG PPS discharges expected, by the Department, to occur during the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A). For the rate periods described in 89 Ill. Adm. Code 148.25(g)(2)(B), payment adjustments will be made for any DRG PPS discharge from a participating hospital; however, the amount of the payment adjustment shall be a per diem amount which will be the quotient of the hospital-specific incentive level divided by the number of DRG PPS inpatient days expected, by the Department, to occur during the applicable rate period, as described in 89 Ill. Adm. Code 148.25(g)(2)(A). The hospital-specific incentive level shall be determined as follows:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.140(e) (continued)

- 1) For the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A), periods beginning on or after October 1, 1992 and for the first subsequent rate period described in 89 Ill. Adm. Code 148.25(g)(2)(B), the hospital-specific incentive level shall be the product of the annual resident funding factor, which for rate periods beginning on or after October 1, 1992, shall be \$7,500, and the number of countable residents, which is the lesser of:
- A) The total number of full-time equivalent residents.
- B) Sixty (60) per centum of the number of acute care inpatient beds.
- 2) For subsequent rate periods not described in subsection (e)(1) above, the hospital-specific incentive level shall be the product of the following 3 factors: Each-as-used-to-qualify-the-hospital-as-a-major-teaching-institution.
- A) The annual resident funding factor, which shall be \$8,500.
- B) The lesser of:
- i) The total number of full-time equivalent countable residents.
- ii) Sixty per centum of the number of acute care inpatient beds, as determined in accordance with subsection (b)(5)(B) of this Section.
- C) The quotient of the qualified rotation ratio divided by the Department's qualified rotation goal.
- 3) The Department's qualified rotation goals are as follows:
- A) Three per centum of the total full-time equivalent rotation time from October 1, 1993, through the day prior to any Medicare rate year, as described in subsection (b)(10) above, in effect as of April 1, 1994.
- B) Four per centum of the total full-time equivalent rotation time of the Medicare rate year beginning on or after January 1, 1995.
- C) Six per centum of the total full-time equivalent rotation

Section 149.140(e)(3)(C) (continued)
time of the Medicare rate year beginning on or after January 1, 1996.
D) Nine per centum of the total full-time equivalent rotation time of the Medicare rate year beginning on or after January 1, 1997.
E) Twelve per centum of the total full-time equivalent rotation time of the Medicare rate year beginning on or after January 1, 1998.
Payments for rotation goals shall begin with the Medicaid rate year that begins subsequent to the conclusion of a rotation goal.
5) Thirty days prior to the beginning of each rate period, hospitals receiving payments under this Section must provide the Department with data necessary to determine total rotation time and the rotation time in qualified settings for the months within a rotation goal.
6) Payment Adjustment Cap. The aggregate payments under this Section shall be capped at \$17,800,000 per rate period. Reimbursement to each hospital receiving payments under this Section shall also be capped at 125 per centum of the product of countable residents multiplied by the annual resident funding factor. If aggregate payments exceed \$17,800,000, payments to each participating major academic hospital will be adjusted in proportion to not exceed the total payments under this Section for the rate period.
7) Appeal Process. Hospitals receiving payments under this Section may appeal the amount of their payments in accordance with 89 Ill. Adm. Code 148.310(a)(3).
f) Reporting requirements. Participating hospitals must provide the Department with data and other information the Department deems necessary to determine eligibility for participation, and to monitor and evaluate this initiative. This information may include, but not be limited to:
1) The names and program year of individual residents.
2) Data maintained for residency review committees.
3) Quarterly data necessary to determine the actual percentage of

Section 149.140(f)(3) (continued)
countable resident time spent in qualified rotation settings.
4) Quarterly data necessary to determine if certain facilities meet the defined requirements of a qualified rotation setting.
(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 149.150 Payments to Hospitals Under the DRG Prospective Payment System
a) Total Medicaid Payment. Under the DRG PPS, the total payment for inpatient hospital services furnished to a Medicaid client by a hospital will equal the sum of the payments listed in subsections (b) through (c). In addition to the payments listed in subsections (b) through (c) of this Section, hospitals shall also receive applicable disproportionate share adjustments in accordance with 89 Ill. Adm. Code 148.120, if applicable, uncompensated care adjustments in accordance with 89 Ill. Adm. Code 148.150, if applicable, and various specific inpatient payment adjustments trauma-center adjustments in accordance with 89 Ill. Adm. Code 148.290(e), if applicable.
b) Payments Determined on a Per Case Basis. A hospital will be paid on a per case basis (with the exception of kidney acquisition costs) the following amounts:

- 1) the appropriate DRG PPS rate for each discharge as determined in accordance with Section 149.100(c) 149.100(b)(2).
- 2) The appropriate outlier payment amounts determined under Section 149.105.
- 3) Capital related costs as determined under subsection (c)(1)(A) (e)(1) below.
- 4) Direct medical education costs as determined under subsection (c)(2)(A) (e)(2) below.
- 5) Indirect medical education costs as determined under subsection (c)(3) below.
- 6) Anesthesia services of hospital employed nonphysician anesthetists (Certified Registered Nurse Anesthetists or "CRNAs") as set forth in Section 6132(a) of the Omnibus Budget

NOTICE OF PROPOSED AMENDMENTS

Section 149.150(b)(6) (continued)

Reconciliation Act of 1989 and in accordance with subsection (c)(4)(A) {e}4}.

7) Kidney acquisition costs in accordance with subsection (c)(5).

8) Primary care access health care education payments, if applicable, in accordance with Section 149.140.

c) Payments for Capital, Direct Medical Education, Indirect Medical Education, CRNA, and Kidney Acquisition Costs. For the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A) these costs shall be paid on a per case basis, with the exception of kidney acquisition costs. For the rate periods described in 89 Ill. Adm. Code 148.25(g)(2)(B), these costs shall be paid on a per diem basis. With the exception of kidney acquisition costs, payments for these costs and shall be calculated as follows:

1) Capital Related Costs

A) For the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A):

i)A) The capital related cost per diem shall be calculated by taking the hospital's total capital related costs as reported on the hospital's latest audited Medicare cost report on file with the Department for the base period as defined in 89 Ill. Adm. Code 148.25(g)(1), divided by the hospital's total inpatient days, trended forward to the midpoint of the rate period using the national total hospital market basket price proxies (DRI).

ii)B) These two trended capital related cost per diems are then added together and divided by two to calculate the hospital's adjusted capital related cost per diem.

iii)G) The adjusted capital related cost per diem amount, as calculated in subsection (c)(1)(A)(ii) {e}4}B) above, shall be rank ordered for all hospitals and capped at the 80th percentile.

iv)D) Each hospital shall receive a per case add-on for capital related costs which shall be equal to the amount calculated in subsection (c)(1)(A)(ii) or subsection (c)(1)(A)(iii) {e}4}B)-of-subsection-

NOTICE OF PROPOSED AMENDMENTS

Section 149.150(c)(1)(A)(iv) (continued)

{e}4}C) above, whichever is less, multiplied by the hospital's average length of stay for services reimbursed under the DRG PPS.

B) For the rate periods described in 89 Ill. Adm. Code 148.25(g)(2)(B):

i) Capital related cost per diem shall be calculated in accordance with subsections (c)(1)(A)(i) through (c)(1)(A)(iii) above.

ii) Each hospital shall receive a per diem add-on for capital related costs which shall be equal to the amount calculated in subsection (c)(1)(A)(ii) or subsection (c)(1)(A)(iii) {e}4}B)-of-subsection {e}4}C) above, whichever is less.

2) Direct Medical Education Costs

A) For the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A):

i)A) The direct medical education cost per diem shall be calculated by taking the hospital's inpatient direct medical education costs as reported on the hospital's latest audited Medicare cost report on file with the Department for the base period as defined in 89 Ill. Adm. Code 148.25(g)(1), divided by the hospital's total inpatient days, trended forward to the midpoint of the rate period using the national total hospital market basket price proxies (DRI).

ii)B) These two trended direct medical education costs per diems are then added together and divided by two to calculate the hospital's adjusted direct medical education cost per diem.

iii)C) The adjusted direct medical education cost per diem amount, as calculated in subsection (c)(2)(A)(ii) {e}4}B) above, shall be rank ordered for all hospitals reporting such costs and capped at the 80th percentile.

iv)D) Each hospital shall receive a per case add-on for direct medical education costs which shall be equal to the amount calculated in subsection (c)(2)(A)(ii) or

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.150(c)(2)(A)(iv) (continued)

subsection (c)(2)(A)(iii) {e}{2}{B}-ex-subsection {e}{2}{C} above, whichever is less, multiplied by the hospital's average length of stay for services reimbursed under the DRG PPS.

B) For the rate periods described in 89 Ill. Adm. Code 148.25(g)(2)(B):

i) Effective with rate periods beginning on or after April 1, 1994, hospitals will be separated into two peer groups for the purpose of computing direct medical education cost per diems.

ii) For the purpose of computing the direct medical education cost per diems, all hospitals described in Ill. Adm. Code 148.25(d) shall be defined as major teaching hospitals. All other hospitals reporting direct medical education costs shall be defined as other teaching hospitals.

iii) Effective with rate periods beginning on or after April 1, 1994, the adjusted direct medical education cost per diem for all hospitals in each peer group shall be calculated by utilizing the direct medical education cost per diems for each hospital that were in effect on June 30, 1993, under the methodology described in subsections (c)(2)(A)(i) and (c)(2)(A)(ii) of this Section.

iv) The adjusted direct medical education cost per diem, as described in subsection (c)(2)(B)(iii) above, shall be rank ordered for all hospitals reporting such costs within each peer group, and capped at the 80th percentile.

v) Each hospital shall receive a per diem add-on for direct medical education costs which shall be equal to the amount calculated in subsection (c)(2)(B)(iii) or subsection (c)(2)(B)(iv) above, whichever is less.

3) Determination of Indirect Medical Education (IME) Adjustment Factor. To determine the indirect medical education (IME) factor, the Department shall:

A) With respect to the rate period described in 89 Ill. Adm. Code 148.25(g)(2)(A), use the indirect medical education

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.150(c)(3)(A) (continued)

(IME) factors, as determined by HCFA, in effect on September 1, 1992. This factor shall be multiplied by the sum of the result of the calculation described in Section 149.100(c)(3) plus any applicable outlier payments as described in Section 149.105.

B) With respect to the rate periods described in 89 Ill. Adm. Code 148.25(g)(2)(B), use the indirect medical education (IME) factors determined by the HCFA, in effect 90 days prior to the date of admission. This factor shall be multiplied by the sum of the result of the calculation described in Section 149.100(c)(3), plus any applicable outlier payments as described in Section 149.105.

4) CRNA Costs

A) Only hospitals that qualify for these payments under the Medicare Program effective at the beginning of each rate period, as described in 89 Ill. Adm. Code 148.25(g)(2), September 1, 1992, shall be eligible for these payments.

B) The CRNA cost per case amount shall be calculated by taking the hospital's total CRNA costs (as reported on the hospital's latest audited Medicare cost report on file with the Department for the base period as defined in 89 Ill. Adm. Code 148.25(g)(1), divided by the hospital's total inpatient days, trended forward to the midpoint of the rate period using the national total hospital market basket price proxies (DRI).

C) Each qualifying hospital, as described in subsection (c)(4)(A) above, shall:

i) For the rate period described in Section 148.25(g)(2)(A), receive a per case add-on for CRNA costs which shall be equal to the amount calculated under subsection (c)(4)(B) above, multiplied by the hospital's average length of stay for services reimbursed under the DRG PPS.

ii) For the rate periods described in 89 Ill. Adm. Code 148.25(g)(2)(B), receive a per diem add-on for CRNA costs which shall be equal to the amount calculated under subsection (c)(4)(B) above.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.150(c) (continued)

- 5) **Kidney Acquisition Costs.** Kidney Acquisition Costs shall be reimbursed on a retrospective basis. The reimbursement shall be calculated by multiplying the hospital's total charges for the kidney acquisition by the hospital's cost-to-charge ratio as described in Section 149.105(c)(3).
- 6) In the event that an audited cost report is not available at the time the rates are calculated, the unaudited report for the applicable period will be used for the calculation of interim rates. Upon completion of the audit, the rate shall be recalculated. Payments made under the interim rate shall be reconciled.
- 7) A hospital wishing to appeal the calculation of its rates must notify the Department within 30 days after receipt of the rate change notification.

d) **Method of Payment**

- 1) **General Rule.** Unless the provisions of subsection (d)(2) apply, hospitals are paid for each discharge based on the submission of a discharge bill. Payments for inpatient hospital services furnished by an excluded distinct part psychiatric or a rehabilitation unit of a hospital are made in accordance with 89 Ill. Adm. Code 148.270(b).

2) **Special Interim Payment for Unusually Long Lengths of Stay**

- A) **First Interim Payment.** A hospital may request an interim payment after a Medicaid client has been in the hospital at least 60 days. Payment for the interim bill is determined as if the bill were a final discharge bill and includes any outlier payment determined as of the last day for which services have been billed.
- B) **Additional Interim Payments.** A hospital may request additional interim payments at intervals of at least 60 days after the date of the first interim bill submitted under subsection (d)(2)(A). Payment for these additional interim bills, as well as the final bill, is determined as if the bill were the final bill with appropriate adjustments made to the payment amount to reflect any previous interim payment made under the provisions of subsection (d)(2).

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 149.150(d) (continued)

- 3) **Outlier Payments.** Except as provided in subsection (d)(2), payment for outlier cases (described in Section 149.105) are not made on an interim basis. The outlier payments are made based on submitted bills and represent final payment.

e) **Reductions to Total Payments**

- 1) **Copayments.** Copayments are assessed under all medical programs administered by the Department and shall be assessed in accordance with 89 Ill. Adm. Code 148.190.
- 2) **Third Party Payments.** Hospitals shall determine that services rendered are not covered, in whole or in part, under any other state or federal medical care program or under any other private group indemnification or insurance program, health maintenance organization, preferred provider organization, workers compensation or the tort liability of any third party. To the extent that such coverage is available, the Department's payment obligation shall be reduced.
- f) **Effect of Change of Ownership on Payments Under the DRG Prospective Payment System.** When a hospital's ownership changes, the following rule applies: Payment for the cost of inpatient hospital services for each patient, including outlier payments, as provided under subsection (b) above, will be made to the entity that is the legal owner on the date of discharge. Payments will not be prorated between the buyer and seller.

- 1) The owner on the date of discharge is entitled to submit a bill for all inpatient hospital services furnished to a Medicaid client regardless of when the client's coverage began or ended during a stay, or of how long the stay lasted.
- 2) Each bill submitted must include all information necessary for the Department to compute the payment amount, whether or not some of the information is attributable to a period during which a different party legally owned the hospital.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

1) Heading of the Part: Hospital Services2) Code Citation: 89 Ill. Adm. Code 1483) Section Numbers: Proposed Action:

148.20, 148.25, 148.40	Amendment
148.50, 148.60, 148.70	Amendment
148.82, 148.120, 148.130	Amendment
148.140, 148.150, 148.160	Amendment
148.170, 148.180, 148.200	Amendment
148.210, 148.230, 148.240	Amendment
148.250, 148.260, 148.270	Amendment
148.280, 148.290, 148.310	Amendment

4) Statutory Authority: Articles III, IV, V, VI, VII and Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, pars. 3-1 et seq., 4-1 et seq., 5-1 et seq., 6-1 et seq., 7-1 et seq., and 12-13), [305 ILCS 5/3, 4, 5, 6, 7, and 12-13] Public Act 87-861, effective July 8, 1992, Public Act 88-85, effective July 14, 1993, and Public Act 88-88, effective July 14, 1993.

5) Complete Description of the Subjects and Issues Involved: The Department of Public Aid is proposing extensive amendments to its rules governing payment for hospital services (89 Ill. Adm. Code 148). These rules specify the basic methodology for reimbursement of hospital services for Medicaid clients. An alternative methodology is provided in the Department's rules on the Diagnosis Related Grouping (DRG) Prospective Payment System (PPS) (89 Ill. Adm. Code 149). The Department intends to adopt these changes on an emergency basis effective October 1, 1993. These changes are required to update the rules for implementation of the revised reimbursement procedures which take effect on October 1, 1993, under Public Act 88-88. Since changes are being made to most aspects of hospital reimbursement under these amendments, all of the changes cannot be summarized here in detail. Interested persons should therefore review the amendments closely.

The substantive changes are as follows:

- Effective October 1, 1993, inpatient hospital reimbursement for hospitals reimbursed under Sections 148.130, 148.260, 148.270, 148.280, and 89 Ill. Adm. Code Part 149, will be maintained at the rate in effect on June 30, 1993, with certain exceptions. Effective on and after April 1, 1994, inpatient hospital reimbursement rates for hospitals reimbursed under the above Sections will be recalculated in accordance with the new provisions contained in these emergency amendments.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

- Many of the changes reflect additions to, or clarification of, definitions utilized by the Department with respect to hospital reimbursement.
- Many of the changes make reference to the Healthy Moms/Healthy Kids Program, which is being implemented by the Department under separate emergency amendments to be filed shortly.
- Hospitals deemed as rural hospitals as of July 14, 1993 that were not previously deemed as rural hospitals at the beginning of the rate period (October 1, 1992), and that shall be treated as sole community hospitals, will be given the option to be reimbursed under the Diagnosis Related Grouping (DRG) Prospective Payment System (PPS) (89 Ill. Adm. Code Part 149) or under an alternative reimbursement methodology (Section 148.260). Estimated annual aggregate spending resulting from these changes is expected to increase by approximately \$200 thousand.
- Clarification has been made concerning the types of services that are covered as hospital services for the purpose of reimbursement, and additional definitions of services have been added. Clarification has also been made regarding the types of services that are not covered as hospital services for the purpose of reimbursement.
- Extensive changes have been made to the Disproportionate Share (DSH) Program under Section 148.120. The substantive changes are as follows:
 - The criteria for qualification as a DSH hospital have been changed to allow for the qualification of a hospital that, on July 1, 1991, had a Medicaid inpatient utilization rate that was at least the mean Medicaid inpatient utilization, and which were located in a planning area with one-third or fewer excess beds, and that, as of June 30, 1992, were located in a federally designated Health Manpower Shortage Area.
 - The Targeted Access Payment (TAP) adjustments and the Critical Care Access (CCA) payment adjustments have been moved from the DSH Program and are now provided as adjustments to the basic inpatient reimbursement programs under Section 148.290 (Adjustments and Reductions to Total Payments). Although the critical care access (CCA) hospitals will no longer be deemed eligible for the DSH Program unless they meet other qualifying criteria, the critical care access (CCA) hospitals will continue to receive the perinatal and obstetrical care payment adjustments that were previously provided under the DSH Program.
 - The inpatient payment adjustments to DSH hospitals have been

NOTICE OF PROPOSED AMENDMENTS

changed. These inpatient payment adjustments are now defined as "Medicaid percentage adjustments" and will be based upon each hospital's Medicaid inpatient utilization rate as follows:

- 1) Hospitals with a Medicaid inpatient utilization rate below the mean Medicaid inpatient utilization rate will receive a payment adjustment of \$25 per inpatient day of care provided;
 - 2) Hospitals with a Medicaid inpatient utilization rate that is equal to or greater than the mean Medicaid inpatient utilization rate, but less than one standard deviation above the mean Medicaid inpatient utilization rate, will receive a payment adjustment of \$25 per inpatient day of care provided, plus \$1 for each one percent that the hospital's Medicaid inpatient utilization rate exceeds the mean Medicaid inpatient utilization rate;
 - 3) Hospitals with a Medicaid inpatient utilization rate that is equal to or greater than one standard deviation above the mean Medicaid inpatient utilization rate, but less than 1.5 standard deviations above the mean Medicaid inpatient utilization rate, will receive a payment adjustment of \$40 per inpatient day of care provided, plus \$7 for each one percent that the hospital's Medicaid inpatient utilization rate exceeds one standard deviation above the mean Medicaid inpatient utilization rate; and
 - 4) Hospitals with a Medicaid inpatient utilization rate that is equal to or greater than 1.5 standard deviations above the mean Medicaid inpatient utilization rate will receive a payment adjustment of \$90 per inpatient day of care provided, plus \$2 for each one percent that the hospital's Medicaid inpatient utilization rate exceeds 1.5 standard deviations above the mean Medicaid inpatient utilization rate.
- County-owned and State-owned hospitals, as described in these emergency amendments, will receive an additional inpatient payment adjustment of \$60 per inpatient day of care provided.
 - The Medicaid percentage adjustments to a hospital, other than county-owned or state-owned hospitals, may not exceed \$155 per inpatient day of care provided for a children's hospital, and may not exceed \$215 per inpatient day of care provided for all other hospitals. These limitations shall, however, be adjusted on October 1, 1993, and annually thereafter, for inflation, as described in this emergency amendment.

NOTICE OF PROPOSED AMENDMENTS

- All hospitals receiving DSH payment adjustments will now receive those adjustments on a per diem basis. Previously, hospitals reimbursed on a per discharge basis received DSH payment adjustments on a per discharge basis.
 - The Medicaid percentage adjustments described above will be multiplied by 2.0 for children's hospitals or by 3.75 for county-owned or state-owned hospitals.
 - Estimated annual aggregate inpatient spending resulting from the changes described above is expected to increase by approximately \$10.1 million.
 - Section 148.130 (Outlier Adjustments for Exceptionally Costly Stays) has been revised to reflect a change in the rate period. The rate period beginning on October 1, 1992, has been extended through March 31, 1994. Effective with rate periods beginning on or after April 1, 1994, outlier adjustment rates will be calculated on April 1, 1994, using the methodologies described in this emergency amendment. Rate periods will begin 90 days after the effective date of DRG PPS rates under the federal Medicare Program and will end 90 days after any subsequent DRG PPS rate change under the federal Medicare Program. These changes are expected to be revenue neutral.
 - Numerous changes have been made in Section 148.140 (Hospital Outpatient and Clinic Services). The majority of these changes provide clarification of the current reimbursement methodology as requested by the federal Health Care Financing Administration or add reference to the Healthy Moms/Healthy Kids Program, which is being implemented by the Department under separate emergency amendments to be filed shortly.
- In addition to the changes described above in Section 148.140 (Hospital Outpatient and Clinic Services), hospitals eligible for reimbursement under the Hospital Ambulatory Care Program will now be eligible to receive outpatient indigent volume adjustments. These outpatient indigent volume adjustments will be calculated by multiplying the payment made by the Department under the Hospital Ambulatory Care Program by the sum of the hospital's outpatient indigent volume factor and 1.00.
- A hospital's outpatient indigent volume factor will be calculated annually based upon a hospital's Medicaid inpatient utilization rate, which will be added to the hospital's uncompensated care utilization rate. The sum of this calculation will then be multiplied by 0.5.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

In order to be eligible for outpatient indigent volume adjustment payments, hospitals will be required to submit the data required under Section 148.150 (Uncompensated Care Payment Adjustments) in accordance with these emergency amendments.

Estimated annual aggregate outpatient spending resulting from these changes is expected to increase by approximately \$27 million.

- The uncompensated care payment adjustment described in Section 148.150 (Uncompensated Care Payment Adjustments) will continue to be based upon the number of Medicaid days provided by the hospital in the uncompensated care base fiscal year multiplied by \$52.65. However, for the period July 1, 1993, through June 30, 1994, each hospital qualifying for an uncompensated care payment adjustment will receive an additional uncompensated care payment adjustment that will be calculated by dividing \$16.5 million by the number of Medicaid days provided by all hospitals in the uncompensated care base fiscal year.

Estimated annual aggregate inpatient spending resulting from these changes is expected to increase by approximately \$16.5 million.

- Section 148.160 (Payment Methodology for County-Owned Hospitals in an Illinois County with a Population of Over 3 Million) has been revised to reflect that county-owned hospitals will be treated as one hospital for the purpose of calculating the reimbursement rate for such county-owned hospitals.

Estimated annual aggregate inpatient spending resulting from these changes is expected to increase by approximately \$28.7 million.

- Section 148.170 (Payment Methodology for State-Owned Hospitals in an Illinois County with a Population of Over 3 Million) has been revised to reflect a change in the methodology for calculating the inflation adjustment. Base year costs, including any adjustments for mandated restructuring, will now be updated from the midpoint of each hospital's base year to the midpoint of the fiscal year for which rates are being set according to the hospital's historical rate of annual cost increases, as described in these emergency amendments.

In addition, State-owned hospitals will now receive supplemental DSH payment adjustments in accordance with the methodology described in these emergency amendment.

Estimated annual aggregate inpatient spending resulting from these changes is expected to increase by approximately \$87 million.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

- Section 148.260 (Calculation and Definitions of Inpatient Per Diem Rates) describes the methodology for calculating inpatient reimbursement rates for psychiatric hospitals, rehabilitation hospitals, long term stay hospitals, and sole community hospitals that elect to be reimbursed under Section 148.260. This Section has been revised to reflect current policy in a number of areas.

Section 148.260 has also been revised to reflect a change in the rate period. The rate period beginning on October 1, 1992, has been extended through March 31, 1994. Effective with rate periods beginning on or after April 1, 1994, a number of changes will take place in the reimbursement methodology as follows:

- Reimbursement rates will be calculated on April 1, 1994, using the methodologies described in this emergency amendment. Rate periods will begin 90 days after the effective date of DRG PPS rates under the federal Medicare Program and will end 90 days after any subsequent DRG PPS rate change under the federal Medicare Program.
 - For the calculation of direct medical education costs, hospitals will be separated into two peer groups, major teaching hospitals and other teaching hospitals. The adjusted direct medical education cost per diem for all hospitals in each peer group will be calculated by utilizing the direct medical education cost per diems that were in effect on June 30, 1993. The adjusted direct medical education cost per diem will be rank ordered for all hospitals reporting such costs within each peer group, and capped at the 80th percentile. Hospitals will receive a per diem add-on for direct medical education costs in accordance with the methodology described in these emergency amendments.
 - Sole community hospitals will continue to receive an inflation adjustment based upon the national hospital market basket price proxies (DRI). Psychiatric hospitals, rehabilitation hospitals, and long term stay hospitals will receive an inflation adjustment based upon the TEFR price inflation factor utilized under the federal Medicare Program.
- Estimated annual aggregate inpatient spending resulting from these changes is expected to increase by approximately \$1.5 million.
- Section 148.270 (Determination of Alternate Cost Per Diem Rates For All Hospitals; Payment Rates for Certain Exempt Hospital Units; and Payment Rates for Certain Other Hospitals) has been revised to reflect current policy in a number of areas.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.270 has also been revised to reflect a change in the rate period. The rate period beginning on October 1, 1992, has been extended through March 31, 1994. Effective with rate periods beginning on or after April 1, 1994, a number of changes will take place in the reimbursement methodology as follows:

- Reimbursement rates will be calculated on April 1, 1994, using the methodologies described in these emergency amendments. Rate periods will begin 90 days after the effective date of DRG PPS rates under the federal Medicare Program and will end 90 days after any subsequent DRG PPS rate change under the federal Medicare Program.
- Distinct part psychiatric units and distinct part rehabilitation units will receive an inflation adjustment based upon the TEFRA price inflation factor utilized under the federal Medicare Program.

Estimated annual aggregate inpatient spending resulting from these changes is expected to decrease by approximately \$326 thousand.

- Section 148.280 (Reimbursement Methodologies for Children's Hospitals and Hospitals Reimbursed Under Special Arrangements) has been revised to reflect current policy.

Section 148.280 has also been revised to reflect a change in the rate period. The rate period beginning on October 1, 1992, has been extended through March 31, 1994. Effective with rate periods beginning on or after April 1, 1994, reimbursement rates for children's hospitals will be calculated on April 1, 1994, using the methodologies described in these emergency amendments. Rate periods will begin 90 days after the effective date of DRG PPS rates under the federal Medicare Program and will end 90 days after any subsequent DRG PPS rate change under the federal Medicare Program.

Annual aggregate inpatient spending resulting from these changes is expected to remain unchanged.

- Extensive changes have been made to Section 148.290 (Adjustments and Reductions to Total Payments). Many of the changes reflect clarification of current policy. The substantive changes are as follows:
- With respect to the Level II rural trauma center adjustment (TCA), the definition of a rural hospital will change effective July 14, 1993, as described in these emergency amendments at Section 148.25(g)(3).

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

- The perinatal and obstetrical adjustments previously made under the critical care access (CCA) hospital provisions of the DSH Program will now be made as adjustments to the basic inpatient reimbursement methodologies.

- The targeted access payment (TAP) adjustments previously made under the DSH Program will now be made as adjustments to the basic inpatient reimbursement methodologies. These TAP adjustments will now be limited to Illinois hospitals.

- Certain hospitals will now qualify for Medicaid high volume adjustments (MHVA). Hospitals that qualify for an adjustment under the DSH Program, with the exception of county-owned and State-owned hospitals, will now be eligible to receive a MHVA payment adjustment of \$60 per inpatient day of care provided. The MHVA payment adjustment for a children's hospital will be multiplied by 2.0. The MHVA adjustment described in this paragraph will be adjusted for inflation on October 1, 1993, and annually thereafter, as described in these emergency amendments.

Illinois hospitals that do not qualify for an adjustment under the DSH Program may also qualify for MHVA payment adjustments if the total number of Medicaid inpatient days provided by the hospital is at least one standard deviation above the mean number of Medicaid inpatient days. In order to qualify for the MHVA adjustment, hospitals located in a geographic area covered by the managed care component of the Healthy Moms/Healthy Kids Program, which is being implemented by the Department under emergency amendments to be filed shortly, will be required to meet certain criteria as described in these emergency amendments. The distribution method for the MHVA adjustment described in this paragraph will be based upon a fund of \$12 million and will be distributed in accordance with the methodology described in these emergency amendments.

Estimated annual aggregate inpatient spending resulting from these changes is expected to increase by approximately \$71.1 million.

- Extensive changes have been made to Section 148.310 (Review Procedure) to reflect the changes in reimbursement methodologies described above and to reflect the review process for a hospital eligible to receive primary care access health care education payments (89 Ill. Adm. Code 149.140), which is also being revised by the Department under emergency amendments to be effective October 1, 1993.
- Related changes are being proposed:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

- In the Department's rules on the Diagnosis Related Grouping (DRG) Prospective Payment System (PPS) (89 Ill. Adm. Code 149).
- In the Department's medical payment rules (89 Ill. Adm. Code 140) to directly implement the assessment/license fees required by P.A. 86-861, as amended by P.A. 88-88.
- In the Department's medical payment rules (89 Ill. Adm. Code 140) to allow for intergovernmental transfers as required by P.A. 88-88.
- In the Department's medical payment rules (89 Ill. Adm. Code 140) to implement the Healthy Moms/Healthy Kids Program.

These related amendments are also being adopted on an emergency basis.

- 6) Will these proposed amendments replace emergency amendments currently in effect? Yes
- 7) Does this rulemaking contain an automatic repeal date? No
- 8) Do these proposed amendments contain incorporations by reference? No
- 9) Are there any other proposed amendments pending on this Part? Yes

Sections	Proposed Action	Illinois Register Citation
148.310	Amendment	July 2, 1993 (17 Ill. Reg. 9840)

- 10) Statement of Statewide Policy Objectives: These proposed amendments do not affect units of local government.

- 11) Time, Place, and Manner in which Interested Persons may comment on this proposed rulemaking: Any interested parties may submit comments, data, views, or arguments concerning this proposed rulemaking. All comments must be in writing and should be addressed to Joanne Jones, Bureau of Rules and Regulations, Illinois Department of Public Aid, 100 South Grand Ave. E., 3rd Floor, Springfield, Illinois 62762. The Department will consider all written comments it receives within 30 days after the publication of this notice.

Any interested persons may review these amendments at the Department of Public Aid's local offices located in each county (except Cook County). In Cook County, the amendments may be reviewed at the Office of the Director, Illinois Department of Public Aid, 310 South Michigan Avenue, Suite 1700, Chicago, Illinois. The amendments may be reviewed at all offices Monday through Friday from 8:30 A.M. until 5:00 P.M. These copies

ILLINOIS REGISTER

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

of the amendments are being made available for review in accordance with federal requirements at 42 CFR 447.205.

These proposed amendments may have an impact on small businesses, small municipalities, and not for profit corporations as defined in Sections 1-75, 1-80 and 1-85 of the Illinois Administrative Procedure Act. These entities may submit comments in writing to the Department at the above address in accordance with the regulatory flexibility provisions in Section 5-30 of the Illinois Administrative Procedure Act. These entities shall indicate their status as small businesses, small municipalities, or not for profit corporations as part of any written comments they submit to the Department.

12) Initial Regulatory Flexibility Analysis:

- A) Date proposed rulemaking was submitted to the Business Assistance Office of the Department of Commerce and Community Affairs:
- B) Types of small businesses affected: Hospitals
- C) Reporting, bookkeeping or other procedures required for compliance: None
- D) Types of professional skills necessary for compliance: None

The full text of the Proposed Amendments begins on the next page:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

TITLE 89: SOCIAL SERVICES
CHAPTER I: DEPARTMENT OF PUBLIC AID
SUBCHAPTER d: MEDICAL PROGRAMS

PART 148
HOSPITAL SERVICES

Section	Hospital Services
148.10	Participation
148.20	Definitions and Applicability
148.25	General Requirements
148.30	Special Requirements
148.40	Covered Hospital Services
148.50	Services Not Covered as Hospital Services
148.60	Limitation On Hospital Services
148.70	Organ Transplants Services Covered Under Medicaid (Repealed)
148.80	Organ Transplant Services
148.82	Heart Transplants (Repealed)
148.90	Liver Transplants (Repealed)
148.100	Bone Marrow Transplants (Repealed)
148.110	Disproportionate Share Hospital (DSH) Adjustments
148.120	Outlier Adjustments for Exceptionally Costly Stays
148.130	Hospital Outpatient and Hospital-Based Clinic Services
148.140	Uncompensated Care Payment Adjustments
148.150	Payment Methodology for County-Owned Hospitals in an Illinois County with a Population of Over 3 Million
148.160	Payment Methodology for State-Owned Hospitals in an Illinois County with a Population of Over 3 Million
148.170	Payment for Pre-operative Days, Patient Specific Orders, and Services Which Can Be Performed in an Outpatient Setting
148.180	Copayments
148.190	Alternate Reimbursement Systems
148.200	Filing Cost Reports
148.210	Pre September 1, 1991, Admissions
148.220	Admissions Occurring on or after September 1, 1991
148.230	Utilization Review and Furnishing of Inpatient Hospital Services
148.240	Directly or Under Arrangements
148.250	Determination of Alternate Payment Rates to Certain Exempt Hospitals
148.260	Calculation and Definitions of Inpatient Per Diem Rates
148.270	Determination of Alternate Cost Per Diem Rates For All Hospitals; and Payment Rates for Certain Exempt Hospital Units; and Payment Rates for Certain Other Hospitals
148.280	Reimbursement Methodologies for Children's Hospitals and Hospitals Reimbursed Under Special Arrangements
148.290	Adjustments and Reductions to Total Payments
148.300	Payment
148.310	Review Procedure

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

148.320	Alternatives
148.330	Exemptions
148.340	Subacute Alcoholism and Substance Abuse Treatment Services
148.350	Definitions
148.360	Types of Subacute Alcoholism and Substance Abuse Treatment Services
148.368	Volume Adjustment (Repealed)
148.370	Payment for Subacute Alcoholism and Substance Abuse Treatment Services

148.373	Utilization (Repealed)
148.376	Utilization, Case-Mix and Discretionary Funds (Repealed)
148.380	Rate Appeals for Subacute Alcoholism and Substance Abuse Treatment Services
148.390	Hearings
148.400	Special Hospital Reporting Requirements

AUTHORITY: Implementing Article III of the Illinois Health Finance Reform Act (Ill. Rev. Stat. 1991, ch. 111 1/2, par. 6503-1 et seq.) [20 ILCS 2215/3] and implementing and authorized by Articles III, IV, V, VI, VII and Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, pars. 3-1 et seq., 4-1 et seq., 5-1 et seq., 6-1 et seq., 7-1 et seq., and 12-13) [305 ILCS 5/3, 4, 5, 6, 7 and 12-13]

SOURCE: Sections 148.10 thru 148.390 recodified from 89 Ill. Adm. Code 140.94 thru 140.398 at 13 Ill. Reg. 9572; Section 148.120 recodified from 89 Ill. Adm. Code 140.110 at 13 Ill. Reg. 12118; amended at 14 Ill. Reg. 2553, effective February 9, 1990; emergency amendment at 14 Ill. Reg. 11392, effective July 1, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 15358, effective September 13, 1990; amended at 14 Ill. Reg. 16998, effective October 4, 1990; amended at 14 Ill. Reg. 18293, effective October 30, 1990; amended at 14 Ill. Reg. 18499, effective November 8, 1990; emergency amendment at 15 Ill. Reg. 10502, effective July 1, 1991, for a maximum of 150 days; emergency expired October 29, 1991; emergency amendment at 15 Ill. Reg. 12005, effective August 9, 1991, for a maximum of 150 days; emergency expired January 6, 1992; emergency amendment at 15 Ill. Reg. 16166, effective November 1, 1991, for a maximum of 150 days; amended at 15 Ill. Reg. 18684, effective December 23, 1991; amended at 16 Ill. Reg. 6255, effective March 27, 1992; emergency amendment at 16 Ill. Reg. 11335, effective June 30, 1992, for a maximum of 150 days; emergency expired November 27, 1992; emergency amendment at 16 Ill. Reg. 11942, effective July 10, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 14778, effective October 1, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 19873, effective December 7, 1992; amended at 17 Ill. Reg. 131, effective December 21, 1992; amended at 17 Ill. Reg. 3296, effective March 1, 1993; amended at 17 Ill. Reg. 6649, effective April 21, 1993; amended at 17 Ill. Reg. —, effective August 30, 1993; amended at 17 Ill. Reg. —, effective —.

NOTE: CAPITALIZATION DENOTES STATUTORY LANGUAGE.

NOTICE OF PROPOSED AMENDMENTS

Section 148.20 Participation

- a) Payment for hospital inpatient, and outpatient hospital and clinic services shall be made only to when provided by a hospital, as described in Section 148.25(b), or a distinct part unit, as described in Section 148.25(c), for covered services, as described in Section 148.50, and for the following types of care:

- 1) General Specialty
- 2) Psychiatric
- 3) Rehabilitation, and
- 4) End-Stage-Renal-Disease-Treatment

- b) Notwithstanding any other provisions of this Part, reimbursement to hospitals for services provided October 1, 1992, through March 31, 1994, July 1, 1992 through September 30, 1992, shall be as follows:

- 1) Base Inpatient Payment Rate. For inpatient hospital services rendered, or, if applicable, for inpatient hospital admissions occurring, on and after October 1, 1992, July 1, 1992, and on or before March 31, 1994, September 30, 1992, the Department shall reimburse hospitals for inpatient services under the reimbursement methodologies in effect for each hospital, and at the base inpatient payment rate calculated for each hospital, as of June 30, 1993 June 30, 1992. The term "base inpatient payment rate" shall include the reimbursement rates calculated effective October 1, 1992, under the following Sections: 148.130, 148.260, 148.270, and 148.280.

- 2) Exemptions. The provisions of subsection (b)(1) above shall not apply to:

- A) Hospitals reimbursed under Sections 148.82, 148.160, or 148.170. Reimbursement for such hospitals shall be in accordance with Sections 148.82, 148.160, or 148.170, as applicable.
- B) Hospitals reclassified as rural hospitals as described in Section 148.40(f)(4). Reimbursement for such hospitals shall be in accordance with Section 148.40(f)(4) and Section 148.260 or 89 Ill. Adm. Code 149.100(c)(1)(A), whichever is applicable.
- C) The inpatient payment adjustments described in Sections

NOTICE OF PROPOSED AMENDMENTS

Section 148.20(b)(2)(C) (continued)

148.120, 148.150, and 148.290. Reimbursement for such inpatient payment adjustments shall be in accordance with Sections 148.120, 148.150, and 148.290, and shall be in addition to the base inpatient payment rate described in subsection (b)(1) above.

For the purpose of calculating the inpatient payment rate for each hospital eligible to receive quarterly payment adjustments for targeted access and critical care, as defined by the Department on June 30, 1992, the payment adjustment for the period July 1, 1992 through September 30, 1992, shall be 25 percent of the annual adjustments calculated for each eligible hospital, as of June 30, 1992.

- 3) For the purpose of calculating the inpatient payment rate for each hospital eligible to receive quarterly payment adjustments for uncompensated care, as defined by the Department on June 30, 1992, the payment adjustment for the period August 1, 1992 through September 30, 1992, shall be one-sixth of the total uncompensated care payment adjustment calculated for each eligible hospital for the uncompensated care rate year, as defined by the Department, ending on July 31, 1992.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.25 Definitions and Applicability

- a) Payment for hospital inpatient, hospital outpatient and hospital hospital-based clinic services shall be made only to a hospital or a distinct part hospital unit as defined in this Section.

- b) The term "hospital" means:

- 1) For the purpose of hospital inpatient reimbursement, any institution, place, building, or agency, public or private, whether organized for profit or not-for-profit, which is located in the State and is subject to licensure by the Illinois Department of Public Health under the Hospital Licensing Act or any institution, place, building or agency, public or private, whether organized for profit or not-for-profit, which meets all comparable conditions and requirements of the Hospital Licensing Act in effect for the state in which it is located. In addition, unless specifically indicated otherwise, for the purpose of inpatient reimbursement, the term "hospital" shall also include: A county-owned hospital in a county with a-

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.25(b)(1) (continued)

~~population of over 3 million and a state-owned hospital in a county with a population of over 3 million.~~

A) County-owned hospitals, which shall mean all county-owned hospitals, as defined in subsection (b)(1) above, that are located in an Illinois county with a population of over 3 million. The term "county-owned hospital in a county with a population of over 3 million" means a hospital, as defined in subsection (b)(1) above, that is located in the State of Illinois.

B) A The term "State-owned state-owned hospital in a county with a population of over 3 million" means a hospital, as defined in the University of Illinois Hospital Act.

C) A hospital unit that is adjacent to or on the premises of the hospital and licensed under the Hospital Licensing Act or the University of Illinois Hospital Act.

2) For the purpose of hospital outpatient and hospital-based-elimie reimbursement, the term "hospital" shall, in addition to the definition described in subsection (b)(1) above, include an encounter rate hospital. An encounter rate hospital is defined as:

A) An Illinois county-owned hospital located in a county with a population exceeding 3 million; or

B) An Illinois county-owned hospital located in a county with a population exceeding 3 million that has provided and that has been paid for 85,000 days or more of inpatient hospital care to recipients of medical assistance during State Fiscal Year 1989; or

C) An Illinois state-owned hospital located in a county with a population exceeding 3 million; or

D) A county-operated outpatient facility located in a county with a population exceeding 3 million that is also located in the State of Illinois.

3) For the purpose of hospital inpatient and outpatient reimbursement, the term "hospital" shall, in addition to the definitions described in subsections (b)(1) and (b)(2) above, include a hospital unit that is adjacent to or on the premises

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.25(b)(2) (continued)

~~of the hospital and licensed under the Hospital Licensing Act.~~

3) For the purpose of non hospital-based clinic reimbursement, the term "hospital" shall mean:

A) A county-operated outpatient facility, as described in subsection (b)(2)(D) above, or;

B) A Certified Hospital Organized Satellite Clinic, as described in 89 Ill. Adm. Code 140.461(f)(1)(B) and subsection (b)(5)(B) below.

4) For the purpose of hospital-based clinic reimbursement, the term "hospital" shall, in addition to the definitions described in subsections (b)(1) and (b)(2) above, mean include a hospital-based clinic meeting the provisions of 89 Ill. Adm. Code Section 140.461(a) and Section 148.40(d) 140.461(a){3}.

5) For the purpose of Healthy Moms/Healthy Kids reimbursement, as described in 89 Ill. Adm. Code 140.464 and Section 148.140(d)(6), the term "Healthy Moms/Healthy Kids managed care clinic" shall mean a clinic meeting the requirements of 89 Ill. Adm. Code 140.461(f). The following four categories of Healthy Moms/Healthy Kids managed care clinics are recognized under the Healthy Moms/Healthy Kids Program, as described in 89 Ill. Adm. Code 140. Subpart G:

A) Certified Hospital Ambulatory Primary Care Centers (CHAPCC), as described in 89 Ill. Adm. Code 140.461(f)(1)(A);

B) Certified Hospital Organized Satellite Clinics (CHOSC), as described in 89 Ill. Adm. Code 140.461(f)(1)(B);

C) Certified Obstetrical Ambulatory Care Centers (COBACC), as described in 89 Ill. Adm. Code 140.461(f)(1)(C); and

D) Certified Pediatric Ambulatory Care Centers (CPACC), as described in 89 Ill. Adm. Code 140.461(f)(1)(D).

c) For the purpose of hospital inpatient reimbursement, the term "distinct part hospital unit" means a hospital, as defined in subsection (b)(1) above, that meets the following qualification(s):

1) Distinct Part Psychiatric Units. A distinct part psychiatric

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.25(c)(1) (continued)

unit is a hospital, with a functional psychiatric unit, that is enrolled with the Department to provide inpatient psychiatric services (category of service 21).

- 2) Distinct Part Rehabilitation Units. A distinct part rehabilitation unit is a hospital, with a functional rehabilitation unit, that is enrolled with the Department to provide inpatient rehabilitation services (category of service 22).
- d) A major teaching hospital is defined as a hospital having four or more graduate medical education programs accredited by the American Accreditation Council for Graduate Medical Education, the American Osteopathic Association Division of Post-doctoral Training, or the American Dental Association Joint Commission on Dental Accreditation. Except, in the case of a hospital devoted exclusively to physical rehabilitation, as defined in 89 Ill. Adm. Code 149.50(c)(2) Section 149-50(e), or in the case of a children's hospital, as defined in 89 Ill. Adm. Code 149.50(c)(3), only one certified program is required to be so classified.
- e) Except as provided in subsection (d) above, a teaching hospital is defined as a hospital having at least one, but no more than three, graduate medical education programs accredited by the American Accreditation Council for Graduate Medical Education, the American Osteopathic Association Division of Post-doctoral Training, or the American Dental Association Joint Commission on Dental Accreditation.
- f) A non-teaching hospital is defined as:
 - 1) A hospital that reports teaching costs on the Medicare or Medicaid cost reports but has no graduate medical education programs; or
 - 2) A hospital that reports no teaching costs on the Medicare or Medicaid cost reports and that has no graduate medical education programs.
- g) Definitions. Unless specifically stated otherwise, the definitions of terms used in Sections 148-160, 148-170, 148-130, 148-260, 148-270, and 148-280, and in 89 Ill. Adm. Code 149 are as follows:
 - 1) "Base period" means the two most recent cost report years for which audited cost reports are available for at least 90 percent of cost reporting all hospitals.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.25(g) (continued)

2) "Rate period" means:

- A) For admissions, or if applicable, dates of service, on or after October 1, 1992, and on or before March 31, 1994, the eighteen month period beginning on October 1, 1992, and ending on March 31, 1994.
- B) Beginning beginning with admissions, or if applicable, dates of service, on or after April 1, 1994, October 1, 1992, the twelve-month period beginning 90 days after the effective date of DRG PPS rates under the federal Medicare Program on October 1 of the year and ending 90 days after any subsequent DRG PPS rate change under the federal Medicare Program September 30 of the following year.
- 3) "Rural hospital" means a hospital that is:
 - A) Located:
 - i) Outside a metropolitan statistical area; or
 - ii) Located 15 miles or less from a county that is outside a metropolitan statistical area and that is licensed to perform medical/surgical or obstetrical services and has a combined approved total bed capacity of 75 or fewer beds in these two service categories as of the effective date of P.A. 88-88 (July 14, 1993), as determined by the Illinois Department of Public Health.
 - B) The Illinois Department of Public Health must have been notified in writing of any changes to a facility's bed count on or before the effective date of P.A. 88-88 (July 14, 1993).

- 4) "Urban hospital" means a hospital that is located in a metropolitan statistical area that does not meet the criteria described in subsection (g)(3) above.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.40 Special Requirements

- a) Inpatient Psychiatric Services

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.40(a) (continued)

- 1) Payment for inpatient hospital psychiatric services shall be made only to:
 - A) A hospital that is a general hospital, as defined in Section 148.25(b), with a functional unit, as defined in Section 148.25(c)(1), that specializes in, and is enrolled with the Department to provide, psychiatric services; or
 - B) A hospital, as defined in Section 148.25(b), that holds a valid license as, and is enrolled with the Department as, a psychiatric hospital, as defined in 89 Ill. Adm. Code 149.50(c)(1).
- 2) Inpatient psychiatric services are those services provided to patients who are in need of short-term acute inpatient hospitalization for active treatment of an emotional or mental disorder.
- 3) Inpatient psychiatric services are not covered for Family and Children Assistance (formerly known as General Assistance) program participants who are 18 years of age or older.
- 4) Federal Medicaid regulations preclude payment for patients over 20 or under 65 years of age in any Institution for Mental Diseases (IMD). Therefore, psychiatric hospitals may not receive reimbursement for services provided to patients over the age of 20 and under the age of 65. In the case of a patient receiving psychiatric services immediately preceding his/her 21st birthday, reimbursement for psychiatric services shall be provided until the earliest of the following:
 - A) The date the patient no longer requires the services; or
 - B) The date the patient reaches 22 years of age.
- 5) A psychiatric hospital must be accredited by the Joint Commission on the Accreditation of Health Care Organizations to provide services to program participants under 21 years of age or be Medicare certified to provide services to program participants 65 years of age and older. Distinct part psychiatric units and psychiatric hospitals located in the State of Illinois, or within a 100 mile radius of the State of Illinois, must execute an interagency agreement with a DMHDD-operated mental health center (State-operated facilities) for coordination of services including, but not limited to,

NOTICE OF PROPOSED AMENDMENTS

Section 148.40(a)(5) (continued)

- 6) Coordination of Care - Purpose. In accordance with subsection (a)(5) above, distinct part psychiatric units and psychiatric hospitals located in the State of Illinois, or within a 100 mile radius of the State of Illinois, must execute a Coordination of Care Agreement in order to participate as a provider of inpatient psychiatric services. The Coordination of Care Agreement shall set forth an agreement between the DMHDD-operated mental health center (State-operated facility) and the hospital for the coordination of services, including but not limited to crisis screening and discharge planning to ensure efficient use of inpatient care. The agreement shall also set forth the manner in which linkage to aftercare services with community mental health agencies or private practitioners shall be carried out.
- 7) Coordination of Care - General Provisions. The general provisions of the Coordination of Care Agreement described in subsection (a)(6) above are as follows:
 - A) The hospital shall agree, on a continuing basis, to comply with applicable licensing standards as contained in State laws or regulations and shall maintain accreditation by JCAHO;
 - B) The provider shall comply with Title VI of the Civil Rights Act of 1964 and the Rehabilitation Act of 1973 and regulations promulgated thereunder which prohibit discrimination on the grounds of sex, race, color, national origin or handicap;
 - C) The provider shall comply with the following applicable federal, State and local statutes pertaining to equal employment opportunity, affirmative action, and other related requirements: 42 U.S.C.A. 2000e (1981), 29 U.S.C.A. 203 et seq. (1982), Ill. Rev. Stat. 1991, ch. 68, pars. 101 et seq. [775 ILCS 25/1 et seq.].
 - D) The Coordination of Care Agreement shall remain in effect until amended by mutual consent or cancelled in writing by either party having given thirty (30) days prior notification.

Section 148.40(a) (continued)

8) Coordination of Care - Special Requirements. The hospital shall:

A) Provide on its premises the facilities, staff, and programs for the diagnosis, admission, and treatment of persons who may require inpatient care and/or assessment of mental status, mental illness, emotional disability, and other psychiatric problems;

B) With the written consent of the individual, notify the community mental health agency that serves the geographic area from which the recipient originated to allow the agency to prescreen the case prior to referring the individual to the designated State-operated facility. The community mental health agency's resources and other appropriate community alternatives shall be considered prior to making a referral to the State-operated facility for admission;

C) Complete any forms necessary and consistent with the Mental Health and Developmental Disabilities Code in the event of a referral for involuntary or judicial admission;

D) With the written consent of the individual, notify the community mental health agency or private practitioner of the date and time of discharge and invite their participation in the discharge planning process;

E) Refer to the State-operated facility only those individuals for whom less restrictive alternatives are documented not to be appropriate at the time based on a clinical determination by the community mental health agency, a private practitioner (if applicable), or the hospital; and

F) Notify the State-operated facility prior to planned transfer of an individual and transfer the individual at such time as to assure arrival of the person prior to 11 a.m. Monday through Friday. In unusual situations, transfers may be made at other times after prior discussion between the hospital and the State-operated facility. The individual will only be transported to the State-operated facility when, based on a clinical determination, he/she is medically stable as determined by the transferring physician. A copy of the transfer summary from the hospital must accompany the recipient at the time of admission to the State-operated facility.

Section 148.40(a) (continued)

9) Coordination of Care - Special Requirements of the State-Operated Facility. The State-operated facility shall:

A) Admit individuals who have been screened as defined in the Coordination of Care Agreement and are appropriate for admission consistent with the provisions of the Mental Health and Developmental Disabilities Code.

B) Evaluate individuals for whom the hospital has executed a Petition and Certificate for involuntary/judicial admission consistent with the Mental Health and Developmental Disabilities Code.

C) Consider for admission voluntary individuals for whom less restrictive alternatives are documented not to be appropriate at the time, based on a clinical determination by the community mental health agency, private practitioner (if applicable), the hospital, or the State-operated facility.

10) A participating hospital not enrolled for inpatient psychiatric services may provide psychiatric care as a general inpatient service only on an emergency basis for a maximum period of 72 hours or in cases in which the psychiatric services are secondary to the services for which the period of hospitalization is approved.

b) Inpatient Rehabilitation Services

1) Payment for inpatient rehabilitation services shall be made only to a general hospital, as defined in Section 148.25(b), with a functional unit of the hospital, as defined in Section 148.25(c)(2), which specializes in, and is enrolled with the Department to provide, physical rehabilitation services or a hospital, as defined in 89 Ill. Adm. Code 149.50(c)(2), which holds a valid license as, and is enrolled with the Department as, a physical rehabilitation hospital.

2) The primary reason for hospitalization is to provide a structured program of comprehensive rehabilitation services, furnished by specialists, to the patient with a major handicap for the purpose of habilitating or restoring the person to a realistic maximum level of functioning.

3) Inpatient rehabilitation services are not covered for Family and

NOTICE OF PROPOSED AMENDMENTS

Section 148.40(b)(3) (continued)

Children Assistance (formerly known as General Assistance) program participants who are 18 years of age or older.

- 4) For payment to be made, a rehabilitation facility, which includes a distinct part unit as described in Section 148.25(c)(2), must be certified by the Health Care Financing Administration for participation under the Medicare Program (Title XIII) and must be licensed and/or certified by the Illinois Department of Public Health to provide comprehensive physical rehabilitation services. Out-of-state hospitals that specialize in physical rehabilitation services must be licensed or certified to provide comprehensive physical rehabilitation services by the authorized licensing agency in the state in which the hospital is located.

5) A rehabilitation facility must meet the following criteria:

- A) Have a full-time (at least 35 hours per week) director of rehabilitation; a participating general hospital with a functional rehabilitation unit must have a part-time (at least 20 hours per week) director of rehabilitation;
 - B) Have an organized medical staff;
 - C) Have available consultants qualified to perform services in appropriate specialties;
 - D) Have adequate space and equipment to provide comprehensive diagnostic and treatment services;
 - E) Maintain records of diagnosis, treatment progress (notations must be made at regular intervals) and functional results; and
 - F) Submit reports as required by the Department of Public Aid.
- 6) A rehabilitation facility must provide, or have a contractual arrangement with an appropriate entity or agency to provide, the following minimal services:
- A) Full-time nursing services under the supervision of a registered nurse formally trained in rehabilitation nursing;
 - B) Full-time physical therapy and occupational therapy services; and

NOTICE OF PROPOSED AMENDMENTS

Section 148.40(b)(6) (continued)

- C) Social casework services as an integral part of the rehabilitation program.

7) A rehabilitation facility must have available the following minimal services:

- A) Psychological evaluation services;
- B) Prosthetic and orthotic services;
- C) Vocational counseling;
- D) Speech therapy;
- E) Clinical laboratory and x-ray services; and
- F) Pharmacy services.

8) The director of rehabilitation must meet the following criteria:

- A) Provide services to the hospital and its patients as specified in subsection (b)(5) above;
- B) Be a doctor of medicine or osteopathy;
- C) Be licensed under State law to practice medicine or surgery; and
- D) Must have, after completing a one-year hospital internship, at least two years of training or experience in the medical management of inpatients requiring rehabilitation services.

9) Personnel of the rehabilitation facility must meet the following minimum standards:

- A) Physicians shall have unlimited licenses to practice medicine and surgery in the state in which they practice. Consultants shall be Board Qualified or Board Certified in their specialty.
- B) Physical therapists shall be licensed by the Illinois Department of Professional Regulation.
- C) Occupational therapists shall be licensed by the Illinois Department of Professional Regulation.

Section 148.40(b)(9) (continued)

- D) Registered nurses and licensed practical nurses shall be currently licensed by the Illinois Department of Professional Regulation or comparable licensing agency in the State in which the facility is located.
- E) Social workers shall have completed two years of graduate training leading to a Master's Degree in social work from an accredited graduate school of social work.
- F) Psychologists shall have a Master's Degree in clinical psychology.
- G) Vocational counselors shall have a Master's Degree in Rehabilitation Counseling, Psychology or Guidance from a school accredited by the North Central Association or its equivalent.
- H) An orthotist or prosthetist, certified by the American Board of Certification in Orthotics and Prosthetics shall fabricate or supervise the fabrication of all limbs and braces.
- c) End-Stage Renal Disease Treatment (ESRDT) Services. The Department provides payment to hospitals, as defined in Section 148.25(b), for ESRDT services only when the hospital is Medicare certified for ESRDT and services are provided as follows:

- 1) Inpatient hospital care is provided for the evaluation and treatment of acute renal disease;
- 2) Outpatient chronic renal dialysis treatments are provided in the outpatient renal dialysis department of the hospital, a satellite unit of the hospital that is professionally associated with the center for medical direction and supervision, or a free-standing chronic dialysis center certified by Medicare, pursuant to 42 CFR 405, Subparts S and U (1984), and the recipient is approved by the Illinois Department of Public Health (IDPH) or the Department of Health and Human Services (DHHS) as eligible for ESRDT services; or
- 3) Home dialysis treatments are provided through the outpatient renal dialysis department of the hospital, a satellite unit of the hospital that is professionally associated with the center for medical direction and supervision, in a patient's home, or through a free-standing chronic dialysis center certified by

Section 148.40(c)(3) (continued)

- Medicare, pursuant to 42 CFR 405, Subparts S and U (1984), and the recipient is approved by the Illinois Department of Public Health (IDPH) or the Department of Health and Human Services (DHHS) as eligible for ESRDT services.
- d) Hospital-Based Organized Clinic Services. Hospital-based clinics, as described in Section 148.25(b)(4), must meet the requirements of 89 Ill. Adm. Code 140.461(a) 140-461(a)(3). The following four categories of hospital-based organized clinic services are recognized in the Medical Assistance Program:
- 1) General Clinic Services. General clinic services are diagnostic, therapeutic and palliative services provided under the direction of a physician who provides for the health care needs of persons who elect to use this type of service rather than another source of primary care. In order to participate as a provider of general clinic services, a hospital must meet the following requisites:
 - A) The hospital must be enrolled for participation in the Medical Assistance Program to provide general inpatient (category of service 20) and general outpatient (category of service 24) hospital services.
 - B) Personnel
 - i) The clinic must be organized as a distinct hospital department with a qualified, trained executive in charge of all activities and responsible to the administration of the hospital;
 - ii) An advisory medical council must function to assist the executive officer in formulating policies for the management and care of clinic patients;
 - iii) The qualifications of the medical staff of the clinic must meet the same requirements that apply to the hospital staff;
 - iv) Nursing services must be provided by licensed nurses under the supervision of a registered professional nurse (R.N.); and
 - v) A dietician must be available to instruct the patients regarding special diets and to plan with the patients in the buying and preparation of food.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.40(d)(1) (continued)

C) Program

- i) The program of the clinic must ensure the provision of comprehensive, high quality, personalized, and continuous health care services to its patients. This means that, at a minimum, the clinic must provide or contract for the services of a sufficient number of primary and specialty care physicians to meet the health needs of patients of the clinic, and must have provisions made for the back-up care of patients when the clinic is not open;

- ii) The laboratory, x-ray, and special therapy services must be available for clinic patients, as needed;

- iii) The pharmacy must be an integral part of the clinic organization; and

- iv) The medical social services in the clinic must be integrated with those in the hospital.

- D) Physical Setting and Equipment. The size, location, ventilation, and lighting of accommodations for interviewing, examining, and treating patients and appropriate equipment must be adequate to serve the number and needs of patients accepted by the clinic;

E) Records

- i) Clinic records must accurately reflect the patient's condition and contain all significant facts bearing on the case, i.e., history, symptoms and complaints, physical examination findings, laboratory and x-ray procedures, and medications ordered and their results, diagnosis, treatment given or recommended and the patient's response to treatment; and

- ii) Clinic records must contain the dates of service and the name of the medical practitioner seeing the patient at the time of each clinic visit.

2) Psychiatric Clinic Services

- A) Psychiatric Clinic Services (Type A). Type A psychiatric clinic services are clinic service packages consisting of

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.40(d)(2)(A) (continued)

diagnostic evaluation; individual, group and family therapy; medical control; optional Electroconvulsive Therapy (ECT); and counseling, provided in the hospital clinic setting for individuals through the age of twenty-one (21).

- B) Psychiatric Clinic Services (Type B). Type B psychiatric clinic services are active treatment programs in which the individual patient is participating in no less than social, recreational, and task-oriented activities at least four (4) hours per day at a minimum of three (3) half days of active treatment per week. The duration of an individual patient's participation in this treatment program is limited to six (6) months in any twelve (12) month period.

- C) Coverage. Psychiatric clinic services are covered for all Medicaid-eligible individuals. The services are not covered for Family and Children Assistance (formerly known as General Assistance) program participants who are 18 years of age or older.

- D) Approval. The Illinois Department of Mental Health and Developmental Disabilities (DMHDD) and the Illinois Department of Public Aid (IDPA) are responsible for approval and enrollment of community hospitals providing psychiatric clinic services. In order to participate as a provider of psychiatric clinic services, a hospital must be enrolled for the provision of inpatient psychiatric services and execute a Psychiatric Clinic Services Type A and B Enrollment Assurance with DMHDD and the Department, which assures that the hospital is enrolled for the provision of inpatient psychiatric services and meets the following requisites:

- i) The hospital must be accredited by, and be in good standing with, the Joint Commission on Accreditation of Health Care Organizations (JCAHO);
- ii) The hospital must have executed a Coordination of Care Agreement between the hospital and the designated Illinois Department of Mental Health and Developmental Disabilities' State-operated facility serving the mentally ill in the appropriate geographic area;
- iii) The clinical staff of the psychiatric clinic must

NOTICE OF PROPOSED AMENDMENTS

Section 148.40(d)(2)(D)(iii) (continued)

collaborate with the mental health service network to provide discharge, linkage and aftercare planning for recipients of outpatient services;

iv) The hospital must agree to participate in Local Area Networks in compliance with P.L. 99-660 and P.A. 86-844; and

v) The hospital must be enrolled to participate in Medicaid Program (Title XIX) and must meet all conditions and requirements set forth by the Illinois Department of Public Aid.

E) Duration of Approval. The approval described in subsection (d)(2)(D) above shall be in effect for a period of two years from the date IDPA approves the psychiatric clinic's enrollment. The approval may be terminated by IDPA or DMHDD with cause upon thirty-(30) days written notice to the hospital. Accordingly, the hospital must submit a thirty-(30) day written notification to IDPA and DMHDD when terminating delivery of psychiatric clinic services.

3) Physical Rehabilitation Clinic Services

A) Physical rehabilitation clinic services include the same rehabilitative services provided to inpatients by hospitals enrolled to provide the services described in Section 148.40(b). Clinic services should be utilized when the patient's condition is such that it does not necessitate inpatient care and adequate care and treatment can be obtained on an outpatient basis through the hospital's specialized clinic.

B) Physical rehabilitation clinic services are not covered for Family and Children Assistance (formerly known as General Assistance) program participants who are 18 years of age or older.

e) Healthy Moms/Healthy Kids Managed Care Clinics. Healthy Moms/Healthy Kids managed care clinics, as described in 89 Ill. Adm. Code 140.461(f) and Section 148.25(b)(5), must meet the requirements of 89 Ill. Adm. Code 140.461(f).

f) Transition to the Diagnosis Related Grouping Prospective Payment System (DRG PPS)

NOTICE OF PROPOSED AMENDMENTS

Section 148.40(f) (continued)

1) Effective with admissions occurring on or after September 1, 1991, and before October 1, 1992, hospitals shall be reimbursed in accordance with the statutes and administrative rules governing the time period when the services were rendered.

Sections 148.80, 148.160, 148.170, 148.250 through 148.300, of 89 Ill. Adm. Code 149, as applicable, hospitals designated as sole community hospitals effective September 1, 1991, shall retain that designation and continue to be reimbursed under the methodology that was in effect on June 30, 1992, for the period July 1, 1992, through September 30, 1992. Hospitals that, on August 31, 1991, had a contract in effect with the Department under the Illinois Health Finance Reform Act (Ill. Rev. Stat. 1991, ch. 23, par. 6501-1 et seq.) that elected to continue to be reimbursed at rates stated in such contracts for general and specialty care effective September 1, 1991, shall continue to be reimbursed at rates stated in such contracts for general and specialty care for the period July 1, 1992, through September 30, 1992.

2) Effective with admissions occurring on or after October 1, 1992, hospitals that, on August 31, 1991, had a contract in effect with the Department under the Illinois Health Finance Reform Act (Ill. Rev. Stat. 1991, ch. 23, par. 6501-1 et seq.) and that elected, effective September 1, 1991, to be reimbursed at rates stated in such contracts, may elect to continue to be reimbursed at rates stated in such contracts for general and specialty care in accordance with subsection (g) of this Section.

3) In the case of a hospital that was determined by the Department to be a rural hospital at the beginning of the rate period described in Section 148.25(g)(2)(A), effective October 1, 1992, for hospitals located in rural areas, those hospitals that shall be treated as sole community hospitals, as described in 89 Ill. Adm. Code 149.125(b), shall elect one of the following payment methodologies to be used by the Department in reimbursing that hospital for inpatient services during the rate period described in Section 148.25(g)(2)(A):

A) the DRG PPS, as described in 89 Ill. Adm. Code 149, or

B) the rate calculated under Section 148.260 Sections 148.250 through 148.300.

4) In the case of a hospital that was not determined by the Department to be a rural hospital at the beginning of the rate

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.40(f)(4) (continued)

period described in Section 148.25(g)(2)(A), but was subsequently reclassified by the Department as a rural hospital, as described in Section 148.25(g)(3), on July 14, 1993, those hospitals that shall be treated as sole community hospitals, as described in 89 Ill. Adm. Code 149.125(b), shall elect one of the following payment methodologies to be used by the Department in reimbursing that hospital for inpatient admissions, or, if applicable, for inpatient services provided on October 1, 1993, and for the duration of the rate period described in Section 148.25(g)(2)(A):

- A) the DRG PPS, as described in 89 Ill. Adm. Code 149, subject to the provisions of 89 Ill. Adm. Code 149.100(c)(1), or
- B) the rate calculated under Section 148.260 that would have been in effect for the rate period described in Section 148.25(g)(2)(A) if the hospital had been designated as a sole community hospital on October 1, 1992.

5) For the rate periods described in Section 148.25(g)(2)(B), hospitals, as described in 89 Ill. Adm. Code 149.125(b), shall elect one of the following payment methodologies to be used by the Department in reimbursing that hospital for inpatient admissions, or, if applicable, for inpatient services provided during such rate periods described in Section 148.25(g)(2)(B):

- A) the DRG PPS, as described in 89 Ill. Adm. Code 149, subject to the provisions of 89 Ill. Adm. Code 149.100(c)(1), or
- B) the rate calculated under Section 148.260.

g) Annual Irrevocable Election

1) Hospitals described in subsections (f)(2) and (f)(3) ~~(e)(2)~~ and ~~(e)(3)~~ above may elect to be reimbursed under the special arrangements described in subsections (f)(2) and (f)(3) ~~(e)(2)~~ and ~~(e)(3)~~ above at the beginning of each rate period.

2) Hospitals described in subsection (f)(4) above may elect to be reimbursed under the special arrangements described in subsection (f)(4) above effective with admissions, or, if applicable, with inpatient services provided, on October 1, 1993, and for the duration of the rate period described in Section 148.25(g)(2)(A).

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.40(g) (continued)

3) Hospitals described in subsection (f)(5) above may elect to be reimbursed under the special arrangements described in subsection (f)(5) above at the beginning of each rate period described in Section 148.25(g)(2)(B).

4) Once a sole community hospital elects to be reimbursed under the DRG PPS, it may not later in that rate period elect to be classified as exempt. Once a sole community hospital elects to be reimbursed as exempt, it may not later in that rate period elect to be reimbursed under the DRG PPS.

5) Hospitals that, on August 31, 1991, had a contract with the Department under the Illinois Health Finance Reform Act may elect to continue to be reimbursed at rates stated in such contracts for general and specialty care. Once such election has been made, the hospital may not later in that rate period elect to be reimbursed under any other methodology.

6) Hospitals that, on August 31, 1991, had a contract with the Department under the Illinois Health Finance Reform Act and have elected to be reimbursed under the DRG PPS may not later elect to be reimbursed at rates stated in such contracts.

h) Notification of Reimbursement Methodology

1) Hospitals shall receive notification from the Department with respect to the reimbursement methodologies that shall be in effect for admissions occurring during the rate period.

2) Hospitals described in subsections (f)(2), (f)(3), (f)(4), and (f)(5) ~~(e)(2)~~ and ~~(e)(3)~~ above shall receive notification of their reimbursement options accompanied by a Choice of Reimbursement form. Each hospital described in subsections (f)(2), (f)(3), (f)(4), and (f)(5) ~~(e)(2)~~ and ~~(e)(3)~~ above shall have thirty (30) days from the date of such notification to file, with the Department, the reimbursement method of choice for the rate period. In the event the Department has not received the hospital's Choice of Reimbursement form within thirty (30) days from the date of notification, as described above, the hospital will automatically be reimbursed for the rate period under the reimbursement methodology that would have been in effect without benefit of the election described in subsection (g) ~~(f)~~ above.

i) Zero Balance Bills. The Department requires a hospital to submit a

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.40(i) (continued)

bill for any inpatient service provided to an Illinois Medicaid eligible person, including newborns, regardless of payor. A "zero balance bill" is one on which the total "prior payments" are equal to or exceed the Department's liability on the claim. The Department requires that zero balance bills be submitted subsequent to discharge in the same manner as are other bills so that information can be available for the maintenance of accurate patient profiles and diagnosis-related grouping (DRG) data, and information needed for calculation of disproportionate share and other rates. The provisions of this subsection apply to all hospitals regardless of the reimbursement methodology under which they are reimbursed.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.50 Covered Hospital Services

- a) The Department shall pay hospitals for the essential provision of inpatient, outpatient, and hospital-based clinic diagnostic and treatment services not otherwise excluded or limited which are provided by a hospital, as described in Section 148.25(b), or a distinct part unit, as described in Section 148.25(c), and which are provided in compliance with hospital licensing standards. Payment may be made for the following types of care subject to the special requirements described in Section 148.40:

- 1) General/specialty services;
 - 2) Psychiatric services;
 - 3) Rehabilitation services; and
 - 4) End-Stage Renal Disease Treatment (ESRDT) services.
- b) Certain programs are administered as hospital covered services with certain restrictions. These programs include hospital residing long term care services, subacute alcoholism and substance abuse treatment services, and the transplant program.
- c) Hospital Residing Long Term Care Services
- 1) Long term care services are not considered by the Department to be hospital services unless the hospital is enrolled with the Department specifically to provide hospital residing long term care services as a hospital-based long term care facility.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.50(c)(1) (continued)

Hospital residing long term care is care provided by hospitals to non-acute patients requiring chronic, skilled nursing care when a skilled nursing facility bed is not available, or non-acute care provided by hospitals that is not routinely performed within a skilled setting, such as ventilator care, when appropriate placements are not available to discharge the patient. Hospitals may not utilize the following beds or facilities for hospital services unless the hospital is enrolled with the Department to provide hospital residing long term care:

- A) A special unit or specified beds which are certified for skilled nursing facility services under the Medicare Program; or
- B) A special unit or separate facility administratively associated with the hospital and licensed as a long term care facility.

- 2) There are three categories of service for hospital residing long term care. These categories are as follows:

- A) Skilled Care - Hospital Residing (category of service 37)

Reimbursement is available for hospitals providing hospital residing long term care when the patients' needs reflect routine skilled care and the inability to place the patient is due to unavailability of a skilled nursing bed.

Reimbursement for this type of care is at the average statewide rate for skilled nursing care. For a hospital to be eligible for such reimbursement, the following criteria must be met:

- i) The hospital must document its attempt to place the patient in at least five appropriate facilities.
- ii) Documentation (form DPA 3127) must be attached to the appropriate claim form and submitted to the Department.
- iii) Reimbursement is limited to services provided after the minimum number of contacts have been made. Reimbursement will not be made for services which were billed as acute inpatient care and denied as not being medically necessary. Reimbursement will be made for up to a maximum of 31 days before additional documentation must be submitted to extend the eligibility for additional reimbursement.

NOTICE OF PROPOSED AMENDMENTS

Section 148.50(c)(2) (continued)

B) Exceptional Care - Hospital Residing (category of service 38)

Reimbursement is available for hospitals providing hospital residing long term care when the level of care is not routinely performed within a skilled setting, such as ventilator care, and the patient cannot be placed in a skilled nursing facility because the level of care is not available. Exceptional care is defined by the Department as the level of care required by persons who are medically stable and ready for discharge from a hospital but who require a multi-disciplinary level of care for physician, nurse, and ancillary specialist services with exceptional costs related to extraordinary equipment and supplies that have been determined to be a medical necessity. This includes, but is not limited to, persons with acquired immune deficiency syndrome (AIDS) or a related condition, head injured persons, and ventilator dependent persons. Reimbursement for this type of care is at the average statewide rate for exceptional care. For a hospital to be eligible for such reimbursement, the following criteria must be met:

- i) The hospital must document its attempt to place the patient in at least five appropriate facilities.
 - ii) Documentation (form BPA 3127) must be attached to the appropriate claim form and submitted to the Department.
 - iii) Reimbursement is limited to services provided after the minimum number of contacts have been made. Reimbursement will not be denied as not being medically necessary. Reimbursement will be made for up to a maximum of 31 days before additional documentation must be submitted to extend the eligibility for additional reimbursement.
- C) DD/MI Non-Acute Care - Hospital Residing (category of service 39)

Reimbursement is available for hospitals providing hospital residing long term care when the pre-admission screening agent has not completed the assessment, planning or discharge process. Reimbursement for this type of care is at the average statewide DD/MI rate. For a hospital to be

NOTICE OF PROPOSED AMENDMENTS

Section 148.50(c)(2)(c) (continued)

eligible for such reimbursement, the following criteria must be met:

- i) The hospital must document that the pre-admission screening agent has not completed the assessment, planning or discharge process.
 - ii) Reimbursement is limited to a maximum of three non-acute level of care days. Reimbursement will not be made for services which were billed as acute inpatient care and denied as not being medically necessary.
- d) Subacute Alcoholism and Substance Abuse Treatment Services
- 1) Subacute alcoholism and other substance abuse treatment is a covered service for clients under Title XIX (Medicaid) and for children 13 to or through 18 years of age in Family and Children Assistance cases in the City of Chicago.
 - 2) Only acute alcoholism and substance abuse treatment services (detoxification) are covered as hospital services. Regulations regarding reimbursement for subacute alcoholism and substance abuse treatment services may be found under Sections 148.340 through 148.390.

e) Transplant Program

The Medical Assistance Program provides for payment for organ transplants only when provided by a certified transplantation center as described in Section 148.82. Payment for kidney and cornea transplants does not require enrollment as an approved transplantation center. Payment for kidney and cornea transplants is made in accordance with the appropriate methodology described in Sections 148.160, 148.170, 148.250 through 148.300, or 89 Ill. Adm. Code 149.100 and 149.150. Kidney acquisition costs shall be reimbursed in accordance with 89 Ill. Adm. Code 149.150(c)(5). Payment for bone marrow, heart, liver, pancreas, kidney/pancreas and other types of transplant procedures may be covered and reimbursed in accordance with Section 148.82 provided the hospital is certified by the Department to perform the transplant.

- 1) Inappropriate Level of Care Program--Under the Inappropriate Level of Care Program, hospitals may be reimbursed for providing care to non-acute patients requiring chronic, skilled nursing-

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.50(e)(1) (continued)

when a skilled nursing facility bed is not available. For a hospital to be eligible for such reimbursement, the following criteria must be met:

- A) The hospital must document its attempt to place the patient in at least five (5) appropriate facilities, and
- B) Documentation must be submitted to the Department at the time of billing.

2) Reimbursement under the Inappropriate Level of Care Program is limited to services provided after the minimum number of contacts specified in subsection (b)(1)(A) above have been made. Reimbursement shall not be made for services which were billed as acute inpatient care and denied as not being medically necessary. Reimbursement shall be made for up to a maximum of 31 days before additional documentation must be submitted to extend the eligibility for additional reimbursement.

3) There are two levels of care and rates associated with the program:

- A) If the patient's needs reflect routine skilled care and the inability to place the patient is due to unavailability of a skilled nursing bed, the appropriate rate shall be the average skilled statewide rate for skilled nursing care.

- B) If the level of care required is not routinely performed within a skilled setting, such as ventilator care, and the patient cannot be placed in a skilled nursing facility because the level of care is not available, the appropriate rate is the average statewide negotiated rate for exceptional care as described in subsection (a)(4) below.

4) Exceptional Care Program. Exceptional Care is the level of medical care required by persons who are medically stable and ready for discharge from a hospital but who require a multi-disciplinary level of care for physician, nurse, and ancillary specialist services with exceptional costs related to extraordinary equipment and supplies that have been determined to be a medical necessity. This includes, but is not limited to, persons with Acquired Immune Deficiency Syndrome (AIDS) or a related condition, head injured persons, and ventilator dependent persons. Consideration may be given to these residents currently residing in a facility who require a

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.50(e)(4) (continued)

multi-disciplinary level of care and meet criteria as stated in 89 Ill. Adm. Code 140.569(j)(2). The method utilized for placement of an exceptional care person shall be as follows:

- A) If hospital-residing long-term care reimbursement is requested under the Exceptional Care Program, the discharging hospital in which the patient is located shall contact the IDPA Exceptional Care nurse assigned to their particular area.
- B) If determined that the request for Exceptional Care is appropriate, the IDPA Exceptional Care nurse shall conduct an assessment at the hospital to determine if the patient meets Exceptional Care criteria.
- C) If the patient is approved by the IDPA Exceptional Care nurse, the patient may be transferred to the contracting nursing facility. The transfer process is the responsibility of the hospital discharge planner or social worker. The Exceptional Care nurse shall be notified of the date the patient has been discharged to the long-term care facility.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.60 Services Not Covered as Hospital Services

Certain services, although included in the Medical Assistance Program and under certain circumstances provided in the hospital setting or by an entity associated with the hospital, are not reimbursed by the Department as hospital services. In addition, certain services currently provided in the hospital outpatient and hospital-based clinic setting are subject to fee-for-service payment methodologies. This means that for these services, hospitals shall be required to conform to the policies and billing procedures in effect for other non-hospital providers of services. Payment for these services shall be based on the same fee schedule that applies to these services when they are provided in the non-hospital setting. Services not covered or reimbursed as hospital services are as follows:

- a) Private Duty Nursing Services. Hospitals may not enroll to provide private duty nursing services. Hospitals are expected to provide all required nursing services, and generally, persons requiring special nursing care are placed in an intensive care unit.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.60 (continued)

- b) Sitter Services. Sitter services for hospitalized program participants are not covered under the Medical Assistance Program.
- c) Dental Services. Hospitals may not enroll to provide dental services. When dental services are provided in the outpatient/clinic setting of a hospital, the dentist shall submit charges to the Department according to the provisions of the Dental Program.
- d) Nurse Anesthetist Services. Payment for general anesthesia services not reimbursed under 89 Ill. Adm. Code 140.400 shall be made only to hospitals that qualify for these payments under the Medicare Program (Title XIII) and shall be made to such hospitals when provided by a hospital employed nonphysician anesthetist (Certified Registered Nurse Anesthetist or "CRNA").

- e) Pharmacy Services. Policy and reimbursement for pharmacy services is described in 89 Ill. Adm. Code 140.440 through 140.450. A hospital pharmacy may enroll on a fee-for-service basis for services provided to a patient in:

- 1) A specified bed or special hospital unit which is certified for skilled nursing facility services under the Medicare Program;
- 2) A special hospital unit or separate facility which is administratively associated with the hospital and is licensed as a long term care facility;
- 3) The emergency room when the services provided are not true emergency services; or
- 4) The outpatient/clinic setting when the services provided are not unique to the hospital setting.

- f) Medical Transportation Services. A hospital that owns and operates medical transportation vehicles as a separate entity, e.g., a private corporation, must enroll as a medical transportation provider. A hospital that owns and operates medical transportation vehicles that are included on the hospital's cost report as a cost center of the hospital may not submit a separate claim for transportation services provided to persons admitted as inpatients. Policy and reimbursement for medical transportation services is described in 89 Ill. Adm. Code 140.490 through 140.492.

- g) Home Health Services. Home health services are not considered by the Department to be hospital services. A home health agency that is

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.60(g) (continued)

administratively associated with a hospital and that is certified for participation as a home health agency by the Medicare Program may apply for participation for the provision of home health services. Policy and reimbursement for home health services is described in 89 Ill. Adm. Code 140.470 through 140.474.

- h) Subacute Alcoholism and Substance Abuse Treatment Services. Only acute alcoholism and substance abuse treatment services (i.e., detoxification) are covered as hospital services. Regulations regarding reimbursement for subacute alcoholism and substance abuse treatment services may be found under Sections at 89 Ill. Adm. Code 148.340 through 148.390.

- i) Hospice Services. Hospice is an alternative to traditional Medicaid coverage. The Hospice Program is responsible for all the client's medical needs related to a terminal illness. If a client chooses the Hospice Program, a physician must certify that the client is terminally ill and has a life expectancy of six months or less.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.70 Limitation On Hospital Services

- a) Payment for inpatient hospital care in general and specialty hospitals shall be made only when it is recommended by a qualified physician and the care is essential as determined by the appropriate utilization review authority. For hospitals or distinct part units reimbursed on a per diem basis under Sections 148.160 through 148.170 and 148.250 through 148.300, payment shall not exceed the number of days approved for the recipient's care by the appropriate utilization review authority (see Section 148.240). If Medicare benefits are not paid because of non-approval by the utilization review authority, payment shall not be made on behalf of the Department.

- b) For hospitals or distinct part units reimbursed on a per case basis, payment for inpatient hospital services shall be made in accordance with 89 Ill. Adm. Code Part 149.

- c) For hospitals, or distinct part units reimbursed on a per diem basis, under Sections 148.160 through 148.170 and 148.250 through 148.300, payment for inpatient hospital services shall be made based on calendar days. The day of admission shall be counted. The day of discharge shall not be counted. An admission with discharge on the same day shall be counted as one day. If a recipient is admitted,

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.70(c) (continued)

discharged and re-admitted on the same day, only one day shall be counted.

- d) In obstetrical cases, payment for services to both the mother and the newborn child shall be made at one per diem rate, or one per case rate, whichever is applicable. Only in instances in which the medical condition of the newborn, as certified by the utilization review authority, necessitates care in other than the newborn nursery, shall payment be made in the child's name separately.

- e) Payment for inpatient psychiatric hospital care in a psychiatric hospital, as defined in 89 Ill. Adm. Code 149.50(c)(1), shall be made only when such services have been provided in accordance with federal regulations at 42 CFR Part 441, Subparts C and D. Payment for all inpatient psychiatric services is subject to a prepayment review. All prepayment review shall be conducted by the Department's designated peer review agent. Prepayment review shall be used to determine the appropriateness and necessity of the inpatient psychiatric care. Only inpatient psychiatric care medically necessary, as determined by a physician licensed to practice medicine in all its branches, will be reimbursed by the Department. The following criteria exemplify the factors that shall be used to determine the medical necessity of inpatient psychiatric care:

- 1) The patient's condition indicates that he or she suffers from an acute psychological or physiological disorder requiring inpatient hospital intervention (including, but not limited to: acute disabling symptoms as a response to bio-psycho-social stress; acute danger to self or others; the medical necessity for interventions possible only in an inpatient hospital setting); and
- 2) A comprehensive treatment plan has been developed and progress documented for the patient (including, but not limited to: physician's progress notes; participation in medical psychotherapy; assessment of available rehabilitative resources; creation of treatment goals).

f) Payment for transplantation transplant costs (with the exception of kidney and cornea transplants), including organ acquisition costs, shall be made only when provided by an approved transplantation center as described in Section 148.82 148.80(e) through (h). Payment for kidney and cornea transplantation transplant costs does not require enrollment as an approved transplantation center. Payment for kidney acquisition costs does not require enrollment as an

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.70(f) (continued)

approved transplantation center, but is only provided to hospitals reimbursed on a per case basis in accordance with 89 Ill. Adm. Code 149.

- g) Payment for end-stage renal disease treatment shall be made only when provided to recipients who have been screened by and meet medical criteria established by the Department of Public Health.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.82 Organ Transplant Services

a) Introduction

The Department of Public Aid will cover organ transplants as identified under subsection (b) below which are provided by certified organ transplant centers which meet the requirements specified in subsections (c) through (h) of this Section.

b) Covered Services

- 1) Bone Marrow, heart, liver, or pancreas/pancreas-kidney transplantation excluding bone marrow searches.
- 2) Other types of transplant procedures may be covered when a hospital has been certified by the Department as a transplant center eligible to perform such transplants. Centers must complete the certification process established in Section 148.82(c) 148.80(e) and provide the necessary documentation of the number of transplant procedures performed and the survival rates.
- 3) Medically necessary work-up and evaluation up to three (3) days prior to transplantation.
- c) Certification Process
 - 1) In order to be certified to receive reimbursement for transplants performed on Medicaid patients, the hospital must:
 - A) Request an application from the Bureau of Hospital Services;
 - B) Submit a completed application to the Department for the type of transplant for which the center is seeking certification;

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.82(c)(1) (continued)

- C) Meet certification criteria established in subsection (d) below, based upon review and recommendation of each application by the State Medical Advisory Committee (SMAC); and
- D) Submit a detailed status report on each patient for the type of transplant for which the hospital is seeking certification. Such reports must include the date of transplant, the length of hospitalization, charges, survival rates, patient-specific transplant outcome, and complications (including cause of death, if applicable) for all transplants performed for the two years preceding the date of the application. To protect the privacy of patients included in this report, names of Medicaid and non-Medicaid patients are not required.
- 2) The Department shall notify the hospital of approval or denial of the hospital as a transplant center for Medicaid eligible patients.
- 3) In the event that no hospital formally certified by the Department is able to provide a covered service set forth in subsection (b) above within the time frame necessary to preserve the recipient's health, the Department shall review a request for prior approval of the service from a non-certified facility, and if the facility satisfies the criteria for certification, approve the request on an individual case basis.

d) Certification Criteria

- 1) Hospitals seeking certification as a transplant center shall submit documentation to verify that:
 - A) The hospital is a tertiary care hospital capable of providing all necessary medical care required by the transplant patient;
 - B) The hospital is affiliated with an academic health center;
 - C) The hospital has had the transplant program for heart and liver transplants in operation for at least three years with twelve 12 transplant procedures per year for the past two years and twelve 12 cases before that for adult heart and liver transplants;

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.82(d)(1) (continued)

- D) The hospital has had the transplant program for adult and pediatric bone marrow transplants in operation for at least two years with twelve transplant procedures per year for the past two years;
- E) A hospital specializing in pediatric heart and/or liver transplants must have a program in operation for at least three years and must have performed a minimum of six transplant procedures per year for the past two years, and six before that;
- F) The hospital has had the transplant program in operation for at least three years with 25 transplant procedures per year for the past two years and 25 cases before that for kidney transplants, and five transplant procedures per year for the past two years and five before that for pancreas transplants, or twelve 12 transplant procedures per year for the past two years and twelve 12 before that for kidney/pancreas transplants;
- G) The hospital has experts, on staff, in the fields of cardiology, anesthesiology, immunology, infectious disease, nursing, social services, organ procurement, associated surgery and internal medicine to complement the transplant team. In addition, in order to qualify as a transplant center for pediatric patients, the hospital must also have experts in the field of pediatrics;
- H) The hospital has an active cardiovascular medical and surgical program as evidenced by the number of cardiac catheterizations, coronary arteriograms and open heart procedures per year for heart transplant candidates;
- I) The hospital has pathology resources that are available for studying and reporting the pathological responses for transplantation;
- J) The hospital complies with applicable State and Federal laws and regulations;
- K) The hospital participates in a recognized national donor procurement program, abides by its rules, and provides the Department with the name of the national organization of which it is a member;

NOTICE OF PROPOSED AMENDMENTS

Section 148.82(d)(1) (continued)

- L) The hospital has an interdisciplinary body to determine the suitability of candidates for transplantation;
- M) The hospital has blood bank support necessary to meet the demands of a certified transplant center; and
- N) The hospital meets the applicable transplant survival rates as supported by the Kaplan-Meier method or other method accepted by the Department:
- i) A one-year survival rate of 50 percent for bone marrow transplant patients;
 - ii) A one-year survival rate of 75 percent and a two-year survival rate of 60 percent for heart transplant patients;
 - iii) A one-year survival rate of 75 percent and a two-year survival rate of 60 percent for liver transplant patients.
 - iv) A one-year survival rate of 90 percent for kidney transplant and a one-year survival rate of 80 percent for pancreas transplant; or a one-year survival rate of 80 percent for kidney/pancreas transplant.

- 2) The commitment of the hospital to support the transplant center must be at all levels as evidenced by such factors as financial resources, allocation of space and the support of the professional staff for the transplant program and its patients. The hospital must demonstrate that:

- A) Component teams are integrated into a comprehensive transplant team with clearly defined leadership and responsibility;
 - B) The hospital safeguards the rights and privacy of patients;
 - C) The hospital has adequate patient management plans and protocols to meet the patient and hospital's needs.
- 3) The hospital must identify, in writing, the director of the transplant program and the members of the team as well as their qualifications. Physician team members must be identified as board certified, in preparation for board certification, or

NOTICE OF PROPOSED AMENDMENTS

Section 148.82(d)(3) (continued)

pending board certification, and the transplant coordinator's name must be submitted.

- 4) The hospital must provide patient selection criteria including indications and contraindications for the type of transplant procedure for which the facility is seeking certification.

e) Recertification Process/Criteria

- 1) The Department will conduct an annual review for certification of transplant centers. A certified center must submit documentation established under subsections (c), (d), (f) and (h) of this Section for review by the Department's State Medical Advisory Committee for recertification as a transplant center.
 - 2) Survival rates of previous transplant patients must be documented prior to certification. The center must maintain patient volume in the year of certification based on previous transplant statistics.
 - 3) The Department shall notify the hospital of approval or denial of the recertification of the hospital as a transplant center.
- f) Notification of Transplant
- 1) The hospital must notify the Department prior to performance of the transplant procedure. The notification letter must be from a physician on the transplant team.
 - 2) The notification must include the admission diagnosis, pre-transplant diagnosis and the initial work-up summary of medical findings.
 - 3) The Department shall notify the hospital regarding receipt of the notification and provide the appropriate "patient tracking" forms to the hospital.
- g) Reimbursement
- 1) Hospital services rendered for transplant procedures under this Section are exempt from the provisions of Sections 148.250 148-240 through 148.330 and the 89 Ill. Adm. Code 149 of the Department's administrative rules governing hospital reimbursement. Hospital reimbursement for transplants covered within this Section is an all-inclusive rate for the admission,

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.82(g)(1) (continued)

regardless of the number of days of care associated with that admission, which is limited to a maximum of 60 percent of the hospital's usual and customary charges to the general public for the same procedure for the number of days listed below for specific types of transplants:

- A) Three days of pre-operative inpatient work-up; and
 - B) A maximum 30 consecutive days of post-operative inpatient care for heart, pancreas, or kidney/pancreas transplant; or
 - C) 40 consecutive days of inpatient care for liver transplant; or
 - D) 50 consecutive days of inpatient care for bone marrow transplant; or
 - E) For those transplants covered under subsection (b)(2), the number of consecutive days of inpatient care specified within the transplant certification process.
- 2) Reimbursement will be approved only when the Department's letter acknowledging the notification of the transplant procedure is attached to the hospital's claim.

- 3) Applicable disproportionate share payment adjustments shall be made in accordance with Section 148.120(g). Applicable outlier adjustments shall be made in accordance with Section 148.130. Applicable inpatient payment adjustments shall be made in accordance with Section 148.290.

- 4) The rate will not include transportation and physician fees when reimbursed pursuant to 89 Ill. Adm. Code 140.410 through 140.414 and 89 Ill. Adm. Code 140.490 through 140.492, respectively.

h) Reporting Requirements of Certified Transplant Center

The following documentation must be submitted within the time limits set forth in this subsection.

1) Patient Tracking

- A) The center must submit annually a statistical summary including information for all patients having received

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.82(h)(1)(A) (continued)

transplants at the transplant center. Patients not covered by Medicaid may be identified numerically or by other means identified by the hospital, to protect patient confidentiality. The summary must include, but is not limited to, short and long term outcome on all patients.

- B) The discharge summary for each Medicaid patient must be received by the Department within thirty 30 days of the patient's discharge.
- C) The annual outcome summaries for each Medicaid patient must be received by the Department within thirty 30 days of the annual patient post-transplant evaluation.
- D) For those Medicaid patients who expire, a summary must be received by the Department within thirty 30 days of the patient's death.

2) Notification of Changes

The center must notify the Department within thirty 30 days of any changes in its program including, but not limited to, certification criteria, patient selection criteria, members of the transplant team and the coordinator.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.120 Disproportionate Share Hospital (DSH) Adjustments

Disproportionate Share (DSH) adjustments for inpatient services provided prior to October 1, 1993, shall be determined and paid in accordance with the statutes and administrative rules governing the time period when the services were rendered. The Department shall make an annual determination of those hospitals qualified for adjustments under this Section effective October 1, 1993, and each October 1, thereafter.

- a) Qualified Disproportionate Share Hospitals (DSH). DSH adjustments for inpatient services provided prior to October 1, 1992, shall be determined and paid in accordance with the statutes and administrative rules governing the time period when the services were rendered, except as specifically indicated otherwise in this Part and with the following exception: Beginning with State Fiscal Year 1993, the annual determination of those hospitals qualifying for adjustments under this Section shall be made effective on October 1,

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(a) (continued)

1992, and each October 1 thereafter, hospitals qualified for DSH adjustments on June 30, 1992, shall continue to be eligible for such adjustments for inpatient services provided July 1, 1992, through September 30, 1992, in accordance with 89 Ill. Adm. Code 148.20(b). Hospitals located in a federally designated Health Manpower Shortage Area (42 CFR 57.1980) on June 30, 1992, that would have met the criteria described in (a)(2) if such designation had been effective on July 1, 1991, shall be eligible for DSH adjustments for inpatient services provided July 1, 1992, through September 30, 1992, utilizing the payment adjustment methodologies defined in the statutes and administrative rules which were in effect on June 30, 1992. For inpatient services provided on or after October 1, 1993, October 1, 1992, the Department shall make adjustment payments to hospitals which are deemed as disproportionate share by the Department. A hospital may qualify for a DSH adjustment in one of the following ways:

- 1) The hospital's Medicaid inpatient utilization rate, as defined in subsection (1)(5) of this Section, in terms of inpatient days of care provided to Title XIX recipients compared to total inpatient days of care provided, is at least one half standard deviation above the mean Medicaid utilization rate, as defined in subsection (1)(3) of this Section. Title XIX specifically excludes days of care provided to Family and Children Assistance (formerly known as General Assistance) and Aid to the Medically Indigent (AMI) days but does include the types of days described in subsection (e)(3) below, in this paragraph, the term "inpatient day" includes each day in which an individual (including a newborn) is an inpatient in the hospital whether or not the individual is in a specialized ward and whether or not the individual remains in the hospital for lack of suitable placement elsewhere.

- 2) The hospital's low income utilization rate exceeds 25 per centum 25%. For this alternative, payments for all patient services (not just inpatient) for Medicaid, Family and Children Assistance (formerly known as General Assistance), Aid to the Medically Indigent (AMI) and/or any local or state government funded care, must be counted as a percentage of all net patient service revenue. To this percentage, the percentage of total inpatient charges attributable to inpatient charges for charity care (less payments for GA and AMI inpatient hospital services, and/or any local or state government-funded care) must be added.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(a) (continued)

- 3) Illinois hospitals that, on July 1, 1991, were located in a federally designated Health Manpower Shortage Area (42 CFR 57.1980) and that had a Medicaid inpatient utilization rate, as defined in subsection (1)(5) of this Section (a)(1) above, that was at least the mean Medicaid inpatient utilization rate, as defined in subsection (1)(3) of this Section, for all hospitals in Illinois receiving Medicaid payments from the Department and which were located in a planning area with one-third or fewer excess beds as determined by the Illinois Health Facilities Planning Board (77 Ill. Adm. Code 1100), and that, as of June 30, 1992, were located in a federally designated Health Manpower Shortage Area (42 CFR 57.1980). The provisions of this subsection shall no longer apply effective on or after October 1, 1993.

4) Illinois hospitals that:

- A) Have have a Medicaid inpatient utilization rate, as defined in subsection (1)(5) of this Section (a)(1) above, which is at least the mean Medicaid inpatient utilization rate, as defined in subsection (1)(3) of this Section, for all hospitals in Illinois receiving Medicaid payments from the Department, and
- B) also have have a Medicaid obstetrical inpatient utilization rate, as defined in subsection (1)(6) of this Section, that is at least one standard deviation above the mean Medicaid obstetrical inpatient utilization rate, as defined in subsection (1)(4) of this Section for all hospitals in Illinois receiving Medicaid payments from the Department for obstetrical services.

- 5) Any children's hospital, which means a hospital devoted exclusively to caring for children. A hospital which includes a facility devoted exclusively to caring for children that is separately licensed as a hospital by a municipality shall be considered a children's hospital to the degree that the hospital's Medicaid care is provided to children.

- 6) Critical Care Access (CCA) Hospitals--CCA Hospitals are hospitals reimbursed under Sections 148-260 through 148-200 of 89 Ill. Adm. Code 149 that meet at least one of the following criteria:

- A) The hospital is designated, as of the first day of July-

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(a)(6)(A) (continued)

preceding the DSH determination year, as a Level-II perinatal center by the Illinois Department of Public Health, is located in a rural area, and provides a disproportionate share of perinatal services.

- i) For hospitals meeting the criteria in subsection (a)(6)(A) above, a disproportionate share of perinatal services shall be calculated by dividing each such hospital's Medicaid perinatal admissions by its total Medicaid admissions to arrive at the perinatal percentage.
- ii) For hospitals meeting the criteria in subsection (a)(6)(A) above, these hospitals with a perinatal percentage of 30 percent or above shall be deemed to provide a disproportionate share of perinatal services.
- b) The hospital is located in a rural area, as of the first day of July preceding the DSH determination year, and provides a disproportionate share of obstetrical services.
 - i) For hospitals meeting the criteria in subsection (a)(6)(B) above, a disproportionate share of obstetrical services shall be calculated by dividing each such hospital's Medicaid obstetrical admissions by its total Medicaid admissions to arrive at the obstetrical percentage.
 - ii) For hospitals meeting the criteria in subsection (a)(6)(B) above, these hospitals with an obstetrical percentage of 20 percent or above shall be deemed to provide a disproportionate share of obstetrical services.
- b) In addition, to be deemed a DSH hospital, a hospital must provide the Department, in writing, with the names of at least two obstetricians with staff privileges at the hospital who have agreed to provide obstetric services to individuals entitled to such services under a State Medicaid plan. In the case of a hospital located in a rural area (that is, an area outside of a Metropolitan Statistical Area, as defined by the Executive Office of Management and Budget), the term "obstetrician" includes any physician with staff privileges at the hospital to perform nonemergency obstetric procedures. This requirement does not apply to a hospital in which the inpatients are predominantly individuals under 18 years of age;

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(b) (continued)

or does not offer nonemergency obstetric services as of December 22, 1987. Hospitals that do not offer nonemergency obstetrics to the general public, with the exception of those hospitals described in 89 Ill. Adm. Code 149.50(c)(1) through (c)(4), must submit a statement to that effect.

- c) In making the determination described in subsections (a)(1) and (a)(4)(A) above, the Department shall utilize:
 - 1) The hospital's final audited cost report for the hospital's base fiscal year. Medicaid inpatient utilization rates, as defined in subsection (1)(5) of this Section subsections (a)(1) and (a)(4)(A) above, which have been derived from final audited cost reports, are not subject to the Review Procedure described in Section 148.310, with the exception of errors in calculation.
 - 2) In the absence of a final audited cost report for the hospital's base fiscal year, the Department shall utilize the hospital's unaudited cost report for the hospital's base fiscal year. Due to the unaudited nature of this information, hospitals shall have the opportunity to submit a corrected cost report for the determination described in subsections (a)(1) and (a)(4)(A) above. Submittal of a corrected cost report in support of subsections (a)(1) and (a)(4)(A) above must be received no later than the first day of July preceding the DSH determination year for which the hospital is requesting consideration of such corrected cost report for the determination of DSH qualification. Corrected cost reports which are not received in compliance with these time limitations will not be considered for the determination of the hospital's Medicaid inpatient utilization rate as described in subsection (1)(5) of this Section subsections (a)(1) and (a)(4)(A) above.
- A) Hospitals' Medicaid inpatient utilization rates, as defined in subsection (1)(5) of this Section subsections (a)(1) and (a)(4)(A) above, which have been derived from unaudited cost reports, are not subject to the Review Procedure described in Section 148.310, with the exception of errors in calculation. Pursuant to subsection (c)(2) above, hospitals shall have the opportunity to submit corrected cost report information prior to the Department's final DSH determination.
- B) In the event a subsequent final audited cost report reflects a Medicaid inpatient utilization rate, as

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(c)(2)(B) (continued)

described in subsection (1)(5) of this Section subsections (a)(1) and (a)(4)(A) above, which is lower than the Medicaid inpatient utilization rate derived from the unaudited cost report utilized for the DSH determination, the Department shall recalculate the Medicaid inpatient utilization rate based upon the final audited cost report, and recoup any overpayments made.

- 3) Certain types of inpatient days of care provided to Title XIX recipients are not available from the cost report, i.e., Medicare/Medicaid crossover claims, out-of-state Title XIX Medicaid utilization levels, HMO days and inappropriate level of care days. To obtain Medicaid utilization levels in these instances, the Department shall utilize:

- A) Medicare/Medicaid Crossover Claims. The Department will utilize the Department's paid claims data adjudicated through the last day of June preceding the DSH determination year for each hospital's base fiscal year. Effective with DSH determinations on and after October 1, 1992, hospitals may submit additional information to document Medicare/Medicaid crossover days which were not billed to the Department due to a determination that the Department had no liability for deductible and/or coinsurance amounts. This information must be submitted in log form. The log must include a patient account number or medical record number, patient name, Medicaid recipient identification number, Medicare identification number, date of admission, date of discharge, the number of covered days, and the total number of Medicare/Medicaid crossover days. This log must include all Medicare/Medicaid crossover days billed to the Department and all Medicare/Medicaid crossover days which were not billed to the Department for services provided during the hospital's base fiscal year. If a hospital does not submit a log of Medicare/Medicaid crossover days that meets the above requirements, the Department will utilize the Department's paid claims data adjudicated through the last day of June preceding the DSH determination year for the hospital's applicable base fiscal year.
- B) Out-of-state Title XIX Utilization Levels. Hospital statements and verification reports from other states will be required to verify out-of-state Medicaid recipient utilization levels. The information submitted must include

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(c)(3)(B) (continued)

only those days of care provided to out-of-state Medicaid recipients during the hospital's base fiscal year.

- C) HMO days. The Department will shall utilize the Department's HMO claims data available to the Department as of the last day of June preceding the DSH determination year for each hospital's base fiscal year to determine the number of inpatient days provided to recipients enrolled in an HMO.
- D) Inappropriate Level of Care Days. The Department will utilize the Department's paid claims data adjudicated through the last day of June preceding the DSH determination year for each hospital's base fiscal year to determine the number of inappropriate level of care days provided to recipients.
- d) Hospitals may apply for DSH status under subsection (a)(2) by submitting an audited certified financial statement for the hospital's base fiscal year. The audited certified financial statement must contain the following breakdown of information prior to submittal to the Department for consideration:
 - 1) Total hospital net revenue for all patient services, both inpatient and outpatient, for the hospital's base fiscal year.
 - 2) Total payments received directly from State and local governments for all patient services, both inpatient and outpatient, for the hospital's base fiscal year.
 - 3) Total gross inpatient hospital charges for charity care (this must not include contractual allowances, bad debt or discounts, except contractual allowances and discounts for Family and Children Assistance, formerly known as General Assistance, GA and AMI patients), for the hospital's base fiscal year.
 - 4) Total amount of the hospital's gross charges for inpatient hospital services for the hospital's base fiscal year.
- e) With the exception of cost-reporting children's hospitals in contiguous states that provide 100 or more inpatient days of care to Illinois program participants, only those cost-reporting hospitals that qualify for DSH in the state in which they are located based upon the Federal definition of a DSH hospital, as defined in Section 1923(b)(1) of the Social Security Act, may qualify for DSH hospital

Section 148.120(e) (continued)

adjustments under subsections (g) and (h) of this Section. For purposes of determining the Medicaid inpatient utilization rate, as described in subsection (1)(5) of this Section and as required in Section 1923(b)(1) of the Social Security Act, out-of-state hospitals will be measured in relationship to one standard deviation above the mean Medicaid inpatient utilization rate in their state. Out-of-state hospitals that do not qualify by the Medicaid inpatient utilization rate from their state may submit an audited certified financial statement as described in subsection (d) above. Payments to out-of-state hospitals will be allocated using the same methods as described in subsections (g) through (h).

f) Time Limitation Requirements for Additional Information.

1) Beginning with the October 1, 1992, DSH determination year, the information required in subsections (a)(2), (c), (d) and (e) must be received no later than the first day of July preceding the DSH determination year for which the hospital is requesting consideration of such information for the determination of DSH qualification. Information required in this section which is not received in compliance with these limitations will not be considered for the determination of those hospitals qualified for DSH adjustments.

2) Beginning with the October 1, 1992, DSH determination year, the information required in subsections (b) and (j)(5)(B) must be received within 30 calendar days after receipt of notification from the Department that the information must be submitted. Information required in this Section which is not received in compliance with these limitations will not be considered for the determination of those hospitals qualified for DSH adjustments.

g) Inpatient Payment Adjustments to DSH Hospitals. The adjustment payments required by subsection (a) above shall be calculated annually as follows:

1) Five Million Dollar Fund Adjustment

A) Hospitals qualifying as DSH hospitals under subsection (a)(1) that have a Medicaid inpatient utilization rate, as described in subsection (1)(5) of this Section, which is at least one standard deviation above the mean Medicaid inpatient utilization rate, as described in subsection (1)(3) of this Section, and hospitals qualifying as DSH

Section 148.120(g)(1)(A) (continued)

hospitals under subsection (a)(2) of this Section will receive an add-on payment to their inpatient rate.

B) The distribution method for the add-on payment described in subsection (g)(1)(A) above is based upon a fund of \$5 million \$5M. All hospitals qualifying under subsection (g)(1)(A) above (a)(1) that have a Medicaid inpatient utilization rate which is at least one standard deviation above the mean Medicaid inpatient utilization rate, and all hospitals qualifying as DSH hospitals under subsection (a)(2) will receive a five-dollar-\$5 per day add-on to their current rate. The total cost of this adjustment is calculated by multiplying each hospital's most recent completed fiscal year Medicaid inpatient utilization data (adjusted based upon historical utilization and projected increases in utilization) by five-dollars-\$5. The total dollar amount of this calculation is then subtracted from the \$5 million \$5M fund.

C) The remaining fund balance is then distributed to the hospitals that qualify under subsection (a)(1) above that have a Medicaid inpatient utilization rate, as described in subsection (1)(5) of this Section, which is at least one standard deviation above the mean Medicaid inpatient utilization rate, in proportion to the percentage by which the hospital's Medicaid inpatient utilization rate exceeds one standard deviation above the State's mean Medicaid inpatient utilization rate, as described in subsection (1)(3) of this Section. This is done by finding the ratio of each hospital's percent Medicaid utilization to the State's mean plus one standard deviation percent Medicaid value. These ratios are then summed and each hospital's proportion of the total is calculated. These proportional values are then multiplied by each hospital's most recent completed fiscal year Medicaid inpatient utilization data paid inpatient-day-values (adjusted based upon historical utilization and projected increases in utilization). These weighted values are summed and each hospital's proportion of the summed weighted value is calculated. Each individual hospital's proportional value is then multiplied against the \$5 million \$5M pool of money available after the five dollars-\$5 per day base add-on has been subtracted.

D) The total dollar amount calculated for each qualifying hospital under subsection (g)(1)(C) above, plus the

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(g)(1)(D) (continued)

initial five-dollars-(\$5) per day add-on amount calculated for each qualifying hospital under subsection (g)(1)(B) above, is then divided by the Medicaid inpatient utilization data (adjusted based upon historical utilization and projected increases in utilization) inpatient-day-projections to arrive at a per day add-on value. Hospitals qualifying under subsection (a)(2), will receive the minimum adjustment of five-dollars-(\$5) per inpatient day. The adjustments calculated under this subsection are subject to the adjustments described in subsections (h) and (i) and the limitations described in subsection (k) of this Section (m).

- 2) Medicaid Percentage Adjustment. In addition to the adjustment methodology described in subsection (g)(1) above, all DSH hospitals described in subsections (a)(1), (2), (3), (4), and (5) shall receive a payment adjustment which shall will be calculated annually as follows:

- A) The payment adjustment shall be calculated based upon the hospital's Medicaid inpatient utilization rate, as defined in subsection (1)(5) of this Section. (a)(4) and subject to subsections (h), and (i), and (j) below, as follows:
- i) Hospitals with a Medicaid inpatient utilization rate below the mean Medicaid inpatient utilization rate of 75-percent-or-above shall receive a payment adjustment of \$25 \$275;
- ii) Hospitals with a Medicaid inpatient utilization rate that is equal to or greater than the mean Medicaid inpatient utilization rate but less than one standard deviation above the mean Medicaid inpatient utilization rate of at-least-50-percent, but less than 75-percent, shall receive a payment adjustment of \$25 plus \$1 for each one percent that the hospital's Medicaid inpatient utilization rate exceeds the mean Medicaid inpatient utilization rate \$175;
- iii) Hospitals with a Medicaid inpatient utilization rate that is equal to or greater than one standard deviation above the mean Medicaid inpatient utilization rate but less than 1.5 standard deviations above the mean Medicaid inpatient utilization rate of at-least-40-percent, but less than 50-percent, shall

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(g)(2)(A)(iii) (continued)

receive a payment adjustment of \$40 plus \$7 for each one percent that the hospital's Medicaid inpatient utilization rate exceeds one standard deviation above the mean Medicaid inpatient utilization rate \$150; and

- iv) Hospitals with a Medicaid inpatient utilization rate that is equal to or greater than 1.5 standard deviations above the mean Medicaid inpatient utilization rate of at-least-30-percent, but less than 40-percent, shall receive a payment adjustment of \$90 plus \$2 for each one percent that the hospital's Medicaid inpatient utilization rate exceeds 1.5 standard deviations above the mean Medicaid inpatient utilization rate. \$100+ and
- v) Hospitals with a Medicaid inpatient utilization rate less than 30-percent shall receive a payment adjustment of \$85.
- B) For county-owned hospitals, hospitals as described in Section 148.25(b)(1)(A) subsection (i), or a state-owned hospital, as described in Section 148.25(b)(1)(B), the amount calculated pursuant to subsection (g)(2)(A) above shall be increased by \$60 per day \$35.
- C) For hospitals described in subsection (i) that are designated as a Level III perinatal center by the Illinois Department of Public Health, the amount calculated pursuant to subsection (g)(2)(B) above shall be increased by \$150.
- D) The amount calculated pursuant to subsection (g)(2)(C) above for a hospital described in subsection (i) shall be adjusted on October 1, 1992, and on the first day of July of each year thereafter, by the annual percentage change in the per diem cost of inpatient hospital services as reported in the most recent annual Medicaid cost report.
- C) The Medicaid percentage adjustment payment, calculated in accordance with this subsection (g)(2), to a hospital, other than county-owned hospitals, as described in Section 148.25(b)(1)(A), or a state-owned hospital, as described in Section 148.25(b)(1)(B), shall not exceed \$155 per day for a children's hospital, as described in subsection (a)(5) of this Section, and shall not exceed \$215 per day for all other hospitals.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(g)(2) (continued)

D)E} The amount calculated pursuant to subsections (g)(2)(A) through (g)(2)(C) above for a hospital net described in subsection (i) shall be adjusted on October 1, 1993, and annually thereafter, by a percentage equal to the lesser of:

- i) The increase in the national hospital market basket price proxies (DRI) hospital cost index for the most recent 12 month period for which data are available; or
- ii) The percentage increase in the statewide average hospital payment rate, as described in subsection (l)(8) of this Section, over the previous year's statewide average hospital payment rate.

E) The amount calculated pursuant to subsections (g)(1) and (g)(2)(A) through (g)(2)(D) above for hospitals described in Section 148.25(b)(1)(A) shall be no less than the DSH rates in effect on June 1, 1992, except that this minimum shall be adjusted on the first day of July of each year by the annual percentage change in the per diem cost of inpatient hospital services as reported on the two most recent annual Medicaid cost reports. The per diem cost of inpatient hospital services is calculated by dividing the total allowable Medicaid costs by the total allowable Medicaid days.

F)F} For hospitals paid on a per diem basis and those reimbursed under 89-III-Adm-Code-148-80(g), the amount calculated pursuant to subsections (g)(1) and (g)(2)(A) through (g)(2)(D) above, as adjusted pursuant to subsections (h), and (i), and (j) below, plus any applicable amount calculated under subsections (j) and (k) of this Section shall be the inpatient payment adjustment in dollars for the applicable DSH determination year, subject to the limitations described in subsections (g)(2)(C) and (k) (m) of this Section, and the adjustments described in subsection (g)(2)(E) above. The adjustments calculated under subsections (g)(1) and (g)(2)(A) through (g)(2)(E) of this Section shall be paid on a per diem basis and shall be applied to each covered day of care provided.

G} For hospitals paid on a per discharge basis, the amount calculated pursuant to subsections (g)(1) and (g)(2) above, as adjusted pursuant to subsections (h) and (i) below,

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(g)(2)(G) (continued)

shall be multiplied by the hospital's average length-of-stay, and this sum plus any applicable amount calculated under subsections (j) and (k) of this Section shall be the inpatient payment adjustment in dollars for the applicable DSH determination year, subject to the limitations described in subsection (m) of this Section. The adjustments calculated under subsections (g)(1) and (g)(2) of this Section shall be applied to each covered discharge of Children's Hospital Inpatient Payment Adjustment. For a children's hospital hospital, as defined in subsection (a)(5), the payment adjustment calculated under subsection (g)(2) above Medicaid inpatient utilization rate as defined in subsection (a)(1) shall be multiplied by 2.0.

- h) Children's Hospital Inpatient Payment Adjustment. For a children's hospital hospital, as defined in subsection (a)(5), the payment adjustment calculated under subsection (g)(2) above Medicaid inpatient utilization rate as defined in subsection (a)(1) shall be multiplied by 2.0.
- i) County Hospital Inpatient Adjustor Payment Adjustment. For county hospitals, defined in Section 148.25(b)(1)(A), as an Illinois county hospital in a county of over 3 million in population, the payment adjustment calculated under subsection (g)(2) above Medicaid inpatient utilization rate as defined in subsection (a)(1) above shall be multiplied by 3.75 2.75.

j) State-Owned Hospital Inpatient Adjustor. For a state-owned hospital, as defined in Section 148.25(b)(1)(B), the payment adjustment calculated under subsection (g)(2) above shall be multiplied by 3.75.

j) Targeted Access Payment (TAP) Adjustment.

- 1) For the period July 1, 1992 through September 30, 1993, these hospitals qualified for TAP Adjustments on June 30, 1992 shall continue to be eligible for such adjustments. The payment adjustment for the period July 1, 1992 through September 30, 1992 shall be calculated in accordance with Section 148.20(b)(3). Effective on or after October 1, 1992, TAP adjustments shall be determined in accordance with subsections (j)(2) through (j)(7) below.

2) Medicaid Percentage Adjustment.

- A) Hospitals qualifying for DSH adjustments under subsections (a)(1) through (4) or (5) that are reimbursed under Sections 148.250 through 148.300 or 89-III-Adm-Code-149, shall qualify for the TAP Medicaid percentage adjustment if they meet at least one of the following criteria:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(j)(2)(A) (continued)

- i) The hospital is located in an urban area and has 500 or fewer licensed beds as determined by the Illinois Department of Public Health (IDPH), based upon the most current IDPH published report entitled "Bed Count-Average Length of Stay-Average Daily Census and Percent Occupancy for Non-Federal Hospitals in Illinois", which is available to the Illinois Department of Public Aid in the month immediately preceding the DSH determination year, or
- ii) The hospital is located in a rural area and has 300 or fewer licensed beds as determined by the Illinois Department of Public Health (IDPH), based upon the most current IDPH published report entitled "Bed Count-Average Length of Stay-Average Daily Census and Percent Occupancy for Non-Federal Hospitals in Illinois", which is available to the Illinois Department of Public Aid in the month immediately preceding the DSH determination year, or
- iii) The hospital is a children's hospital as defined in subsection (a)(6) above.

B) The TAP-Medicare percentage adjustment for eligible hospitals, as defined in subsection (j)(2)(A) above, shall be calculated based upon the eligible hospital's Medicare inpatient utilization rate as defined in subsection (a)(1) above.

C) Eligible hospitals with a Medicare inpatient utilization rate of 35% or above shall receive an adjustment of \$70.00 per Medicare admission in the TAP base year and all other eligible hospitals shall receive an adjustment per Medicare admission in the TAP base year which is calculated by dividing the individual hospital's Medicare inpatient utilization rate by 35% and multiplying the result by \$70.00.

3) Obstetrical-Care Adjustment.

A) Hospitals that qualify for DSH adjustments under subsections (1), (2), (3) or (4) are reimbursed under Sections 148.250 through 148.300 of 89 Ill. Adm. Code 149, provide nonemergency obstetrical services, and that have complied with the requirements of subsection (b) above.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(j)(3)(A) (continued)

- shall receive a TAP-obstetrical care adjustment if they meet at least one of the following criteria:
- i) The hospital is located in an urban area and has 500 or fewer licensed beds as determined by the Illinois Department of Public Health (IDPH), based upon the most current IDPH published report entitled "Bed Count-Average Length of Stay-Average Daily Census and Percent Occupancy for Non-Federal Hospitals in Illinois", which is available to the Illinois Department of Public Aid in the month immediately preceding the DSH determination year, or
- ii) The hospital is located in a rural area and has 300 or fewer licensed beds as determined by the Illinois Department of Public Health (IDPH), based upon the most current IDPH published report entitled "Bed Count-Average Length of Stay-Average Daily Census and Percent Occupancy for Non-Federal Hospitals in Illinois", which is available to the Illinois Department of Public Aid in the month immediately preceding the DSH determination year.

B) The TAP-obstetrical care adjustment for eligible hospitals, as defined in subsection (j)(2)(A) above, shall include:

- i) an adjustment of \$680.00 per Medicare obstetrical admission in the TAP base year, and
- ii) an additional adjustment, up to \$240.00 per Medicare obstetrical admission in the TAP base year, based upon the hospital's obstetrical admission percentage. The obstetrical admission percentage is the ratio of the hospital's obstetrical admissions to the obstetrical admissions provided by all hospitals qualified for the TAP-obstetrical care adjustment. The adjustment shall be calculated by giving the hospital providing the most obstetrical admissions a \$240.00 adjustment per Medicare obstetrical admission in the TAP base year and all other qualifying hospitals an adjustment equal to the individual hospital's Medicare obstetrical percentage divided by the obstetrical percentage of the hospital with the highest obstetrical percentage, the result of which shall then be multiplied by \$240.00.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(j) (continued)

4) Children's Care Adjustment.

A) Hospitals shall receive a TAP children's care adjustment if they meet the following criteria:

- i) The hospital qualifies for DSH adjustments under subsections (a)(1), (2), (3), (4) or (5);
- ii) The hospital is reimbursed under 80-III-Adm-Code 148.250 through 148.300 or Part 149; and
- iii) The hospital provides services to children (defined as under the age of 18 and which excludes obstetrical services).

B) The TAP children's care adjustment for eligible hospitals, as defined in subsection (j)(4)(A) above, shall be based upon the eligible hospital's children's admission percentage in accordance with subsection (j)(4)(C) below.

C) Eligible hospitals shall receive a TAP children's care adjustment of up to \$600.00 per Medicaid child's admission in the TAP base year. The adjustment shall be calculated by dividing each eligible hospital's Medicaid children's admissions in the TAP base year by each eligible hospital's total Medicaid admissions in the TAP base year to arrive at the children's admission percentage.

D) The hospital with the highest percentage of Medicaid children's admissions shall receive an adjustment of \$600.00 for each Medicaid child's admission in the TAP base year and all other qualifying hospitals shall receive an adjustment equal to \$600.00 multiplied by the individual hospital's children's admission percentage divided by the children's admission percentage of the hospital with the highest children's admission percentage.

5) Ambulatory Care Network Adjustment.

A) Hospitals qualifying for DSH adjustments under subsections (a)(1), (2), (3) or (4) that are reimbursed under Sections 148.250 through 148.300 or 80-III-Adm-Code Part 149 may qualify for the TAP ambulatory care network adjustment if

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(j)(5)(A) (continued)

they meet at least one of the following criteria:

- i) The hospital is located in an urban area and has 500 or fewer licensed beds as determined by the Illinois Department of Public Health (IDPH), based upon the most current IDPH published report entitled "Bed Count, Average Length of Stay, Average Daily Census and Percent Occupancy for Non-Federal Hospitals in Illinois", which is available to the Illinois Department of Public Aid in the month immediately preceding the DSH determination year; or
- ii) The hospital is located in a rural area and has 300 or fewer beds as determined by the Illinois Department of Public Health (IDPH), based upon the most current IDPH published report entitled "Bed Count, Average Length of Stay, Average Daily Census and Percent Occupancy for Non-Federal Hospitals in Illinois", which is available to the Illinois Department of Public Aid in the month immediately preceding the DSH determination year.

B) Hospitals meeting the criteria described in subsection (j)(5)(A) above shall complete and submit the Ambulatory Care Network Questionnaire in order to be considered for the TAP ambulatory care network adjustment. To receive the TAP ambulatory care network adjustment, eligible hospitals shall be required to enter into an agreement with the Department which describes in detail their involvements in ambulatory care, and includes commitments to maintain operations. Hospitals shall be required to notify the Department in advance of any action which would result in a reduction of 20 percent or more in the number of visits provided by hospital-operated primary care clinics or a reduction of 20 percent or more in the number of visits provided by primary care physicians. The TAP ambulatory care network adjustment shall consist of three (3) possible individual adjustments as follows:

- i) Hospitals reporting the following number of physician office visits on the Ambulatory Care Network--

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(j)(5)(B)(i) (continued)

Questionnaire shall receive the following adjustments per total Medicaid admissions in the TAP base year:

Urban Threshold	Rural Threshold	Adjustment
-----0-----9,999	-----0-----4,999	\$-00-00
-10,000-----40,000	-5,000-----10,000	\$125-00
-40,001-----100,000	10,001-----50,000	\$145-00
-100,001 and over	50,001 and over	\$165-00

ii) Hospitals qualifying for an adjustment under subsection (j)(5)(B)(i) above shall receive an additional \$135.00 per total Medicaid admissions in the TAP base year if they have a formal linkage agreement with City of Chicago Partnerships in Health or Medicaid Partnerships.

iii) Hospitals qualifying for an adjustment under subsection (j)(5)(B)(i) above shall receive an additional \$135.00 per total Medicaid admissions in the TAP base year if they have a formal linkage agreement with a Federally Qualified Health Center, a County Health Clinic, or a Rural Health Clinic.

6) TAP Index Adjustment.--With the exception of adjustments calculated in subsections (j)(2) through (j)(5) for children's hospitals, as described in subsection (a)(5), the sum of the adjustments calculated in subsections (j)(2) through (j)(5) shall be multiplied by the following applicable percentages, which are based upon each hospital's Medicaid inpatient utilization rate as defined in subsection (a)(1):

A) For those hospitals with a Medicaid inpatient utilization rate of 45 percent or above, the applicable percentage is 110 percent.

B) For those hospitals with a Medicaid inpatient utilization rate of at least 25 percent, but less than 45 percent, the applicable percentage is 50 percent.

C) For those hospitals with a Medicaid inpatient utilization rate of less than 25 percent, the applicable percentage is 25 percent.

7) Hospitals eligible for TAP adjustments shall receive the applicable payment adjustments described in subsection (j) of

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(j)(7) (continued)

this Section, in addition to any applicable adjustments described in subsections (g) and (k) of this Section, subject to the limitations described in subsection (m) of this Section, the TAP adjustments shall be paid to eligible hospitals on a quarterly basis.

k) Critical Care Access (CCA) Payment Adjustments.--For the period July 1, 1992 through September 30, 1992, these hospitals qualified for CCA payment adjustments on June 30, 1992, shall continue to be eligible for such adjustments. The payment adjustment for the period July 1, 1992 through September 30, 1992, shall be calculated in accordance with Section 148.20(b)(2).--Effective on or after October 1, 1992, CCA adjustments shall be determined in accordance with subsections (k)(1) through (k)(4) below.

1) CCA hospitals are those hospitals meeting one or more of the criteria described in subsection (a)(6) above.

2) CCA payment adjustments are determined as follows:

A) Level II Rural Perinatal Adjustment.--Hospitals meeting the criteria defined in subsection (a)(6)(A) shall receive an adjustment of \$25.00 per Medicaid perinatal admission in the CCA base year.

B) Rural Obstetrical Adjustment.--Hospitals meeting the criteria defined in subsection (a)(6)(B) shall receive an adjustment of \$675.00 per Medicaid obstetrical admission in the CCA base year.

3) Hospitals qualifying as DSH hospitals under subsections (a)(1), (2), (3), (4) or (5) of this Section that also qualify as CCA hospitals under subsection (a)(6) of this Section shall receive the applicable payment adjustments described in subsection (k) of this Section in addition to any applicable adjustments described in subsections (g) and (j) of this Section, subject to the limitations described in subsection (m) of this Section. The CCA payment adjustments shall be paid to eligible hospitals on a quarterly basis.

4) Hospitals that qualify as DSH hospitals solely under subsection (a)(6) above shall not be eligible for any adjustments described in subsections (g) through (j).--The CCA payment adjustments shall be paid to eligible hospitals on a quarterly basis.

1) DSH Uncompensated Care Payment Adjustment

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(1) (continued)

- 1) The Department shall make disproportionate share uncompensated care payments to hospitals described in subsections (a)(1) through (a)(6) above that are reimbursed under Sections 148.170, 148.250 through 148.300 and 89 Ill. Adm. Code 149 in accordance with this subsection.
- 2) For the period August 1, 1991 through July 31, 1992, the hospital's uncompensated care payment shall be calculated and paid in accordance with the statutes and administrative rules governing the time period when the services were rendered.
- 3) As a condition of eligibility for an uncompensated care payment adjustment during the August 1, 1991, uncompensated care rate year, each hospital shall submit, on or before January 15, 1992, the following information to the Department for the period August 1, 1990 through July 31, 1991:
 - A) The dollar amount of uncompensated care charges rendered in the period described above.
 - B) The dollar amount of charges rendered during this period reimbursed by the Department under General Assistance (Article VI of the Public Aid Code) or Aid to the Medically Indigent (Article VII of the Public Aid Code).
 - C) The dollar amount of Medicaid charges rendered in the period described above.
 - D) The dollar amount of total charges for care rendered in the period described above.

- 4) For the period August 1, 1992 through September 30, 1992, the hospital's uncompensated care payment shall be calculated in accordance with 89 Ill. Adm. Code 148.20(b). This payment is contingent upon the Department's receipt of the data described in subsection (1)(3) above in accordance with the time limitation described in subsection (1)(3) above.

k) DSH Adjustment Limitations.

- 1) Hospitals that qualify for DSH adjustments under subsections (g) through (k) of this Section shall not be eligible for the total DSH adjustment if, during the DSH determination year, the +

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(k)(1) (continued)

- A) The hospital discontinues the provision of non-emergency obstetrical care (the provisions of this subsection shall not apply to those hospitals described in 89 Ill. Adm. Code 149.50(c)(1) through (c)(4) or those hospitals that have not offered nonemergency obstetric services as of December 22, 1987). In this instance, the total DSH adjustments shall be reduced as follows:
 - i) The adjustments calculated under subsections (g)(1) and (g)(2) shall cease effective on the date that the hospital discontinued the provision of such non-emergency obstetrical care.
 - ii) The adjustments calculated under subsections (j) and (k) of this Section shall be pre-rated based upon the date that the hospital discontinued the provision of non-emergency obstetrical care.
 - B) The hospital does not honor its commitment to maintain operations as required in subsection (j)(5)(B)(ii) or this Section in the event that there is a reduction of 20 percent or more in the number of visits provided by hospital operated primary care clinics or a reduction of 20 percent or more in the number of visits provided by primary care physicians, the Department may, subject to approval by the Director, deem the hospital ineligible for the adjustments described in subsection (j)(5)(B) of this Section, either in total or in part.
 - C) The hospital discontinues its formal linkage agreements required in subsections (j)(5)(B)(ii) and (j)(5)(B)(iii), in this instance, the annual adjustment described in subsection (j)(5)(B) shall be pre-rated based upon the date that the formal linkage agreement(s) was discontinued.
 - D) The hospital is no longer recognized or designated by the Illinois Department of Public Health as a Level II perinatal center, as required by subsection (a)(6)(A), in this instance, the annual adjustment described in subsection (k)(2)(A) shall be pre-rated, as applicable, based upon the date that the designation ceased.
- 2) Inpatient Payment Adjustments based upon DSH Determination Reviews. Appeals based upon a hospital's ineligibility for DSH payment adjustments, or their payment adjustment amounts, in

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(1)(2) (continued)

accordance with Section 148.310(b) 148.319, which result in a change in a hospital's eligibility for DSH payment adjustments or a change in a hospital's payment adjustment amounts, shall not affect the DSH status of any other hospital or the payment adjustment amount of any other hospital that has received notification from the Department of their eligibility for DSH payment adjustments based upon the requirements of this Section.

- 3) DSH Payment Adjustment Cap. In accordance with Public Law 102-234, if the aggregate DSH payment adjustments calculated under this Section exceed the State's final DSH Allotment as determined by the Health Care Financing Administration (HCFA), DSH payment adjustments calculated under this Section shall be adjusted in proportion to the lesser State DSH Allotment.

1) Inpatient Payment Adjustment Definitions. The definitions of terms used with reference to calculation of the inpatient payment adjustments are as follows:

- 1) "Base fiscal year" means, for example, the hospital's fiscal year ending in 1991 for the October 1, 1993 1990-for-the-October 1, 1992 DSH determination year, the hospital's fiscal year ending in 1992 for the October 1, 1994 1991-for-the-October 1, 1993 DSH determination year, etc.

- 2) "CCA base year" means, State Fiscal Year 1991-for-CCA payments calculated-for-the-October 1, 1992 DSH determination year, State Fiscal Year 1992-for-CCA payments-calculated-for-the-October 1, 1993 DSH determination year, etc.

- 3) "Children's admission" means-a-claim-billed-as-an-admission-of-an-individual-under-the-age-of-18, which-was-subsequently-paid-by-the-Department-and-contained-within-the-Department's-paid-claims-data-base, but-excludes-these-claims-billed-as-admissions-with-an-ICD-9-CM-principal-diagnosis-code-within-the-range-of 650-and-669-(indicating-an-obstetrical-admission).

- 2)4) "DSH determination year" means-beginning-October-1, 1992, the 12 month period beginning on October 1 of the year and ending September 30 of the following year.

- 3)5) "Mean Medicaid inpatient utilization rate" means a fraction, the numerator of which is the total number of inpatient days provided in a given 12-month period by all Medicaid-participating Illinois hospitals to patients who, for such days, were eligible

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(1)(3) (continued)

for Medicaid under Title XIX of the Federal Social Security Act (42 U.S.C. Sec. 1396a et seq.), and the denominator of which is divided-by the total number of inpatient days provided by those same hospitals. Title XIX specifically excludes days of care provided to Family and Children Assistance (formerly known as General Assistance) and Aid to the Medically Indigent (AMI) days but does include the types of days described in subsection (c)(3) of this Section. In this paragraph, the term "inpatient day" includes each day in which an individual (including a newborn) is an inpatient in the hospital whether or not the individual is in a specialized ward and whether or not the individual remains in the hospital for lack of suitable placement elsewhere.

- 6) "Medicaid charges" means-hospital-charges-for-inpatient, outpatient, and-hospital-based-clinic-services-provided-to recipients-of-Medicaid-assistance-under-Title-XIX-of-the-Social Security-Act.

- 7) "Medicaid days" means-hospital-days-billed-and-reimbursed-by-the Department-and-contained-within-the-Department's-paid-claims data-base, for-recipients-of-Medicaid-assistance-under-Title-XIX of-the-Social-Security-Act.

- 4) "Mean Medicaid obstetrical inpatient utilization rate" means a fraction, the numerator of which is the total Medicaid (Title XIX) obstetrical inpatient days, as defined in subsection (1)(7) below, provided by all Medicaid-participating Illinois hospitals providing obstetrical services to patients who, for such days, were eligible for Medicaid under Title XIX of the Federal Social Security Act (42 U.S.C. Sec. 1396a et seq.), and the denominator of which is the total Medicaid (Title XIX) inpatient days, as defined in subsection (1)(9) below, for all such hospitals. That information shall be derived from claims for applicable services provided in the Medicaid obstetrical inpatient utilization rate base year which were subsequently adjudicated by the Department through the last day of June preceding the DSH determination year and contained within the Department's paid claims data base.

- 5)8) "Medicaid inpatient utilization rate" means a fraction, the numerator of which is the number of a hospital's inpatient days provided in a given 12-month period to patients who, for such days, were eligible for Medicaid under Title XIX of the federal Federal Social Security Act (42 U.S.C. Sec. 1396a et seq.) and

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(1)(5) (continued)

the denominator of which is the total number of the hospital's inpatient days in that same period, Title XIX specifically excludes days of care provided to Family and Children Assistance (formerly known as General Assistance) and Aid to the Medically Indigent (AMI) days but does include the types of days described in subsection (c)(3) of this Section. In this paragraph, the term "inpatient day" includes each day in which an individual (including a newborn) is an inpatient in the hospital whether or not the individual is in a specialized ward and whether or not the individual remains in the hospital for lack of suitable placement elsewhere.

6)9) "Medicaid obstetrical inpatient utilization rate" means a fraction, the numerator of which is the rate of Medicaid (Title XIX) obstetrical inpatient days, as defined in subsection (1)(7) below (a)(10), provided by a Medicaid-participating Illinois hospital providing obstetrical services to patients who, for such days, were eligible for Medicaid under Title XIX of the federal Social Security Act (42 U.S.C. Sec. 1396a et. seq.), and the denominator of which is the total Medicaid (Title XIX) inpatient days, as defined in subsection (1)(9) below (a)(15) provided by such hospital. This information shall be derived from claims for applicable services provided in the Medicaid obstetrical inpatient utilization rate base year which were subsequently adjudicated by the Department through the last day of June preceding the DSH determination year and contained within the Department's paid claims data base for applicable services-billed-and-reimbursed-in-the-Medicaid-obstetrical inpatient-utilization-rate-base-year-(i.e., FY'91-for-the-October-1,-1992-DSH-determination-year,-FY'92-for-the-October-1,-1993-DSH-determination-year,-etc.).

7)10) "Medicaid (Title XIX) obstetrical inpatient days" means hospital inpatient days which were subsequently adjudicated by the Department through the last day of June preceding the DSH determination year billed-and-reimbursed-by-the-Department and contained within the Department's paid claims data base, for recipients of medical assistance under Title XIX of Social Security Act, with an ICD-9-CM principal diagnosis code within the ranges of 650 and 669 which result in childbirth, and specifically excludes Medicare/Medicaid crossover claims.

11) "Obstetrical admission"-means-a-claim-billed-as-an-admission, which-was-subsequently-paid-by-the-Department-and-contained within-the-Department's-paid-claims-data-base,-with-an-ICD-9-CM-

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(1)(7) (continued)

principal diagnosis code within the ranges of 650 and 669 which resulted in childbirth.

12) "Perinatal admission" means those claims billed as admissions, which were subsequently paid by the Department and contained within the Department's paid claims data base, for infants less than 20 days of age at the time of the admission with an ICD-9-CM diagnosis code within the ranges of 760 through 779 and V30 through V39, and those claims billed as admissions, which were subsequently paid by the Department and contained within the Department's paid claims data base, related to pregnancy, childbirth and the puerperium with an ICD-9-CM principal diagnosis code within the range of 630 through 676.

13) "TAP base year" means State Fiscal Year 1991 for TAP payments calculated for the October 1, 1992 DSH determination year, State Fiscal Year 1992 for TAP payments calculated for the October 1, 1993 DSH determination year, etc.

14) "Total charges" means the total amount of a hospital's charges for inpatient, outpatient, and hospital-based clinic services it has provided.

8) "Statewide average hospital payment rate" means the hospital's alternative reimbursement rate, as defined in Section 148.270(a).

9)15) "Total Medicaid (Title XIX) inpatient days", as referred to in subsections (1)(4) and (1)(6) above (a)(9), means hospital inpatient days, excluding days for normal newborns, which were subsequently adjudicated by the Department through the last day of June preceding the DSH determination year billed-and-reimbursed-by-the-Department, and contained within the Department's paid claims data base, for recipients of medical assistance under Title XIX of the Social Security Act, and specifically excludes Medicare/Medicaid crossover claims.

10) "Medicaid obstetrical inpatient utilization rate base year" means, for example, state fiscal year 1992 for the October 1, 1993, DSH determination year; state fiscal year 1993 for the October 1, 1994, DSH determination year, etc.

16) "Total medical assistance admissions" means the total claims billed as admissions which were subsequently paid by the Department and contained within the Department's paid claims data base.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.120(1) (continued)

17) "Uncompensated care base fiscal year" means, for example, State Fiscal Year 1991, for the October 1, 1992, uncompensated care rate year, State Fiscal Year 1992, for the October 1, 1993, uncompensated care rate year, etc.

18) "Uncompensated care base year" means August 1 through July 31 of each year beginning with the initial August 1, 1990, through July 31, 1991, base year.

19) "Uncompensated care charges" for a hospital means:

A) the hospital's charges for inpatient, outpatient, and hospital-based clinic services for which the hospital was not reimbursed by either the patient or a third party (including the Department);

B) less:

i) the amount of the hospital's bad debt recoveries for inpatient, outpatient, and hospital-based clinic services; and

ii) the hospital's charges attributable to inpatient, outpatient, and hospital-based clinic services that it provided without charge or at reduced charges under its obligation under the Federal Hill-Burton Act (42 U.S.C. 291 et seq.).

20) "Uncompensated care rate year" means October 1 through September 30 of each year beginning with the October 1, 1992, rate year.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.130 Outlier Adjustments for Exceptionally Costly Stays

a) Outlier Adjustments. Outlier adjustments are provided for exceptionally costly stays provided by hospitals or distinct part units reimbursed on a per diem basis or hospitals reimbursed in accordance with Section 148.82(g), 89-III--Adm. Code 148-80(g), prior to October 1, 1992, shall be determined and paid in accordance with the statutes and administrative rules governing the time period when the services were rendered with the following exception: beginning with State Fiscal Year 1993, the annual determination of those hospitals qualifying for adjustments under subsection (b) below shall

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.130(a) (continued)

be made effective on October 1, 1992, and each October 1 thereafter. Hospitals qualified for outlier adjustments on June 30, 1992, shall continue to be eligible for such outlier adjustments for inpatient services provided July 1, 1992, through September 30, 1992, at the adjustment rate, and utilizing the adjustment criteria in effect on June 30, 1992.

b) The determination of those services qualified for an outlier adjustment shall be made as follows for services provided on and after October 1, 1992, and for each subsequent rate period, as defined in Section 148.25(g)(2)(B), for hospitals or distinct part units reimbursed on a per diem basis or hospitals reimbursed in accordance with Section 148.82(g), 89-III--Adm. Code 148-80(g):

1) The services must have been provided on or after October 1, 1992; and

2) The services must have been provided to:

A) Children who have not attained the age of six (6) years by hospitals defined by the Department as DSH hospitals under Section 148.120(a) 148.120(a)(1) through (a)(6); or

B) Infants who have not attained the age of one (1) year by hospitals that do not meet the definition of a DSH hospital under Section 148.120(a) 148.120(a)(1) through (a)(6).

3) Claims with total covered charges equal to or above the mean total covered charges plus one standard deviation shall be considered for outlier adjustments once the following calculations have been performed:

A) Total covered charges equal to or exceeding one standard deviation above the mean shall be multiplied by the hospital's cost to charge ratio.

B) The hospital's rate for services provided on the claim shall be multiplied by the number of covered days on the claim.

C) The product of subsection (B) above shall be subtracted from the product of (A) above.

D) The difference of subsection (C) above shall be multiplied

NOTICE OF PROPOSED AMENDMENTS

Section 148.130(b)(3)(D) (continued)

by .25, the product of which shall be the outlier adjustment for the claim.

- E) Third party payments (credits) shall be applied to the final payment made on the claim.

- c) The determination of those services qualified for an outlier adjustment shall be made in accordance with 89 Ill. Adm. Code 149.105 for hospitals reimbursed on a per case basis.

- d) Definition of terms relating to outlier adjustments are as follows:

- 1) "Base fiscal year" means the hospital's fiscal year cost report most recently audited by the Department.
- 2) "Cost to Charge Ratio" means the hospital's Medicaid total allowable cost for all care divided by the Medicaid total covered charges for all care. The Cost to Charge Ratio is derived by utilizing cost report data from the hospital's base fiscal year.
- 3) "Mean total covered charges" means the mean total covered charges (as described in subsection (5) below), for services provided in the most recent state fiscal year for which complete information is available and previous rate period which have been adjudicated paid by the Department, as follows:

- A) For hospitals that do not meet the definition of a DSH hospital under Section 148.120(a) 148.120(a){1}-through {a}{6} in the DSH determination year, the mean total covered charges for all claims for inpatient services provided to individuals under the age of one year; and

- B) For hospitals defined by the Department as DSH hospitals under Section 148.120(a) 148.120(a){1}-through-{a}{6} in the DSH determination year, the mean total covered charges for all claims for inpatient services provided to individuals under the age of six years.

- 4) "Rate for services provided" means the inpatient rate in effect for the type of services provided.

- 5) "Total covered charges" means the amount entered on the UB-82 or UB-92 Uniform Billing Form for revenue code 001 in column 53

NOTICE OF PROPOSED AMENDMENTS

Section 148.130(d)(5) (continued)

(Total Charges), minus the amount in column 54 (Non-Covered Charges) for revenue code 001.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.140 Hospital Outpatient and Hospital-Based-Clinic Services

a) Fee-For-Service Reimbursement

- 1) Reimbursement for hospital outpatient and hospital-based clinic services shall be made on a fee for service basis, except for:

A) Those services that meet the definition of the Hospital Ambulatory Care Program as described in subsection (b)(1) {a}{3} of this Section, and except as described in subsection (b) for ESRPT services and subsection (e) for encounter rate hospitals, which shall be reimbursed in accordance with subsections (b)(4) and (b)(5) of this Section, and adjusted in accordance with subsection (d)(7)(B) of this Section;

- B) ESRPT services, as described in subsection (c) of this Section, which shall be reimbursed in accordance with subsection (c) of this Section, and adjusted in accordance with subsection (d)(7)(B) of this Section;

- C) Those services reimbursed on an encounter rate basis as described in subsection (d) of this Section; and

- D) Those services provided by a Certified Pediatric Ambulatory Care Center (CPACC), as described in 89 Ill. Adm. Code 140.461(f)(1)(D) and Section 148.25(b)(5)(D), which shall be reimbursed in accordance with 89 Ill. Adm. Code 140.464(b).

- 2) Fee-for-service reimbursement Reimbursement levels shall be at the lower of the hospital's usual and customary charge to the public or the Department's statewide maximum reimbursement screens. Hospitals will be required to bill the Department utilizing specific service codes. However, all specific client coverage policies (relating to client eligibility and scope of services available to those clients) which pertain to the service billed are applicable to hospitals in the same manner as to non-hospital providers who bill fee for service.

Section 148.140(a) (continued)

- 3) With respect to those encounter rate hospitals described in Section 148.25(b)(2)(A) and (b)(2)(B), the reimbursement rate described in subsection (a)(2) above shall be adjusted in accordance with subsection (d)(7)(B) of this Section.
- 4) Healthy Moms/Healthy Kids rates, as described in 89 Ill. Adm. Code 140 Table M, shall be paid to Certified Hospital Ambulatory Primary Care Centers (CHAPCC), as described in 89 Ill. Adm. Code 140.461(f)(1)(A) and Section 148.25(b)(5)(A), Certified Hospital Organized Satellite Clinics (CHOSC), as described in 89 Ill. Adm. Code 140.461(f)(1)(B) and Section 148.25(b)(5)(B), and Certified Obstetrical Ambulatory Care Centers (COBACC), as described in 89 Ill. Adm. Code 140.461(f)(1)(C), and Section 148.25(b)(5)(C). Healthy Moms/Healthy Kids rates shall also be paid to Certified Pediatric Ambulatory Care Centers (CPACC), as described in 89 Ill. Adm. Code 140.461(f)(1)(D) and Section 148.25(b)(5)(D), that are provided to non-assigned Healthy Moms/Healthy Kids program clients, as described in 89 Ill. Adm. Code 140.464(b)(1).
- 5) Certified Pediatric Ambulatory Care Centers (CPACC), as described in 89 Ill. Adm. Code 140.461(f)(1)(D) and Section 148.25(b)(5)(D), shall be reimbursed in accordance with 89 Ill. Adm. Code 140.464(b)(2) for assigned clients.

b)2) Hospital Ambulatory Care Program

Effective April 1, 1986, the Department liberalized the list of allowable ambulatory procedures to add many surgical, diagnostic and highly technical treatment procedures that can be performed and reimbursed on an ambulatory basis. Reimbursement for the fee codes established July 1, 1983, and implemented through March 31, 1986, for procedures performed in a hospital setting will be calculated and paid in accordance with the statutes and administrative rules governing the time period in question.

1) Hospital Ambulatory Care Groupings

Under the Hospital Ambulatory Care Program, a Hospital Ambulatory Care list was developed that defines those technical procedures that require the use of the hospital outpatient or hospital-based clinic setting, its technical staff and/or equipment. These procedures were separated into four separate groupings based upon the complexity and historical costs of the procedures. The four separate groupings are as follows:

Section 148.140(b)(1) (continued)

- A) Group I procedures are high level technology surgeries that consume many hospital resources and are costly to deliver.
- B) Group II procedures are certain nonsurgical, very high level technology services recognized and approved by the Department as safe outpatient procedures.
- C) Group III procedures are other surgical, specialized cardiac and diagnostic procedures.
- D) Group IV procedures are specialized treatment procedures, observation services, high risk, and emergency room services.
- 2) Hospital Ambulatory Care List Updating
- The Hospital Ambulatory Care list is updated periodically. As technology changes, so do the procedures that fall into the four categories. In addition, annual changes in the ICD-9-CM procedure codes and their meanings necessitate annual changes to the Hospital Ambulatory Care list.
- 3) Hospital Ambulatory Care Reimbursement Prior to October 1, 1993
- Reimbursement for Hospital Ambulatory Care procedures was initially developed in 1986. For each of the four (4) separate groupings identified in subsection (b)(1) above, a set rate maximum has been developed based upon the complexity of the procedures, historical costs, and teaching status of the hospital, the type of hospital, and the setting in which the procedure would most likely be performed (i.e., outpatient department, general clinic department, psychiatric clinic department, or rehabilitation clinic department). These set rate maximums have been periodically adjusted since 1986 based upon the above factors. Reimbursement for Hospital Ambulatory Care procedures performed prior to October 1, 1993, shall be reimbursed in accordance with the statutes and administrative rules governing the time period when the services were rendered.
- 4) Hospital Ambulatory Care Reimbursement Effective October 1, 1993
- Effective October 1, 1993, reimbursement for Hospital Ambulatory Care procedures shall be as follows:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.140(b) (continued)

- 3) A Hospital-Ambulatory-Care-list-defines-those-technical procedures-that-require-the-use-of-the-hospital-outpatient-or clinic-setting,-its-technical-staff-and/or-equipment.--This-list is-updated-periodically.--The-procedures-are-grouped-according to-type-and-complexity,-each-with-a-separate-rate-structure-as follows:
- A) With respect to Group I procedures described in subsection (b)(1)(A) above, reimbursement shall be High-level technology-surgeries-are-reimbursed at the lesser of charges or the hospital's alternate reimbursement rate, as defined in Section 148.270(a), equivalent to the rate of a one-day inpatient stay.
- B) With respect to Group II procedures described in subsection (b)(1)(B) above, reimbursement shall be Certain non-surgical,-very-high-level-technology-services recognized-and-approved-by-the-Department-as-safe outpatient-procedures-are-reimbursed-in-a-category-separate from-other-specialised-cardiac-and-diagnostic-procedures and-are-reimbursed at the lesser of charges or one of two separate rate maximums depending upon whether the hospital is classified as:
- i) A a-children's-hospital,-as-defined-in-89-Ill.-Adm. Code-149-50(e){3},-or-a major teaching hospital, as defined in Section 148.25(d); or
- ii) With-the-exception-of-a-children's-hospital,-as defined-in-89-Ill.-Adm.-Code-149-50(e){3},-a A hospital defined in Section 148.25(e) through (f).
- C) With respect to the Group III procedures described in subsection (b)(1)(C) above, reimbursement shall be Other surgical-specialised-cardiac-and-diagnostic-procedures-will be-reimbursed at the lesser of charges or one of two separate rate maximums depending upon whether the hospital is classified as:
- i) A a-children's-hospital,-as-defined-in-89-Ill.-Adm. Code-149-50(e){3},-or-a major teaching hospital, as defined in Section 148.25(d); or
- ii) With-the-exception-of-a-children's-hospital,-as defined-in-89-Ill.-Adm.-Code-149-50(e){3},-a A hospital defined in Section 148.25(e) through (f).

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.140(b)(3) (continued)

- D) With respect to the Group IV procedures described in subsection (b)(1)(D) above, reimbursement shall be Specialised-treatment-procedures,-observation-servives, high-risk,-and-emergency-room-servives-will-be-reimbursed at the lesser of charges or-a-set-rate-maximum, or one of six separate rate maximums depending upon whether the hospital is classified as:
- i) A a-children's-hospital,-as-defined-in-89-Ill.-Adm. Code-149-50(e){3},-or-a major teaching hospital, as defined in Section 148.25(d); or
- ii) With-the-exception-of-a-children's-hospital,-as defined-in-89-Ill.-Adm.-Code-149-50(e){3},-a A hospital defined in Section 148.25(e) through (f); and
- iii) Whether whether the service is provided in the outpatient, general clinic, psychiatric clinic, or rehabilitation clinic department.
- 5) Outpatient Indigent Volume Adjustment
- Effective with outpatient services provided on or after October 1, 1993, the Department shall make outpatient indigent volume adjustment payments to the amounts reimbursed under subsections (b)(4)(B) through (b)(4)(D) of this Section to a cost-reporting hospital, as described in Section 148.210(a), other than to those hospitals described in Sections 148.25(b)(2)(A), 148.25(b)(2)(B), 148.25(b)(2)(D), 148.25(b)(3), or 148.25(b)(5)(B), subject to the provisions of subsection (b)(5)(C) below. The outpatient indigent volume adjustment payments shall be in addition to the amounts reimbursed under subsections (b)(4)(B) through (b)(4)(D) above.
- A) Outpatient indigent volume adjustment payments shall be calculated by multiplying the payment to be made by the Department in accordance with subsections (b)(4)(B) through (b)(4)(D) above by the sum of the hospital's outpatient indigent volume factor and 1.00.
- B) A hospital's outpatient indigent volume factor shall be calculated annually as follows:
- i) The hospital's Medicaid inpatient utilization rate, as described in subsection (b)(5)(D)(ii) of this Section,

NOTICE OF PROPOSED AMENDMENTS

Section 148.140(b)(5)(B)(i) (continued)

shall be added to the hospital's uncompensated care utilization rate.

- ii) The sum of the calculation described in subsection (b)(5)(B)(i) above shall be multiplied by 0.5.
- C) In order to be eligible for outpatient indigent volume adjustment payments, a hospital must submit the data required under Section 148.150 in accordance with the requirements of Section 148.150.
- D) Outpatient Indigent Volume Adjustment Definitions. The definitions of terms used with reference to calculation of the outpatient indigent volume adjustments are as follows:
 - i) "Base fiscal year" means, for example, the hospital's fiscal year ending in 1991 for the October 1, 1993, outpatient indigent volume determination year; the hospital's fiscal year ending in 1992 for the October 1, 1994, outpatient indigent volume determination year, etc.
 - ii) "Medicaid inpatient utilization rate" means the percent of Medicaid inpatient utilization as determined in accordance with Section 148.120.
 - iii) Uncompensated care base year" means, August 1 through July 31 of each year beginning with the initial August 1, 1990, through July 31, 1991, base year.
 - iv) "Uncompensated care utilization rate" means the percent of uncompensated care determined in accordance with Section 148.150 in the uncompensated care base year.
- 6) No Year-End Reconciliation
With the exception of the retrospective rate adjustment described in subsection (d)(7)(B) of this Section, no year-end reconciliation for outpatient and clinic services is made.
- 7) Rate Adjustments
With respect to those encounter rate hospitals described in Sections 148.25(b)(2)(A) and (b)(2)(B), the reimbursement rates

NOTICE OF PROPOSED AMENDMENTS

Section 148.140(b)(7) (continued)

described in subsection (b)(4) above shall be adjusted in accordance with subsection (d)(7)(B).

- 8) Services are available to all clients in geographic areas in which an encounter rate hospital or a county-operated outpatient facility is located. All specific client coverage policies (relating to client eligibility and scope of services available to those clients) which pertain to the service billed are applicable to hospitals reimbursed under the Ambulatory Care Program in the same manner as to encounter rate hospitals and to non-hospital and hospital providers who bill and receive reimbursement on a fee-for-service basis.
- 4) A list of restricted inpatient procedures pursuant to Section 148.180(b) has been established and is updated periodically. These restricted inpatient procedures will only be reimbursed when performed outside the inpatient setting or when the hospital supplies justification for an inpatient admission that meets Departmental established criteria. These criteria include, but are not limited to:
 - A) Presence of medical conditions which make prolonged post-operative observations by a nurse or skilled medical personnel a necessity (e.g., heart disease, severe diabetes)
 - B) An unrelated procedure is being done simultaneously which itself requires surgical hospitalization
 - C) The patient is unable to comprehend and/or follow the necessary instruction both prior to and following the procedure due to mental and/or physical impairment, and this would result in inadequate treatment and place the patient at risk
 - D) Emergency admission or recent onset of severe symptoms would prohibit safely performing the procedure on an outpatient basis (e.g., bleeding, severe pain, nausea, vomiting)
 - E) Admission occurs subsequent to the performance of the procedure on an outpatient basis due to conditions such as:
 - i) instability of vital signs

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.140(b)(8)(E) (continued)

- ii) ~~respiratory distress greater than existed pre-operatively~~
- iii) ~~post-operative pain not relieved by oral medication~~
- iv) ~~uncontrolled bleeding~~
- v) ~~lack of state of consciousness appropriate to age and development~~
- vi) ~~presence of persistent nausea or vomiting~~
- vii) ~~inability to ambulate consistent with age, previous mobility status and/or procedure.~~

c) Payment for outpatient end-stage renal disease treatment (ESRDT) services provided pursuant to Section 148.40(c) 148.40(a)(3) shall be made at the Department's payment rates, as follows:

- 1) For inpatient hospital services services provided pursuant to Section 148.40(c)(1) 148.40(a)(3), the Department shall reimburse hospitals pursuant to Sections 148.240 through 148.300 and 89 Ill. Adm. Code 149.
- 2) For outpatient services or home dialysis treatments provided pursuant to Sections 148.40(c)(2) or 148.40(c)(3) 148.40(a)(3) or (B) or (G), the Department will reimburse hospitals and clinics for ESRDT services at a rate which will reimburse the provider for the dialysis treatment and all related supplies and equipment, as defined in 42 CFR 405.231(o) (1984). This rate will be that rate established by Medicare pursuant to 42 CFR 405.439 and 405.441 (1989).
- 3) Payment for non-routine services. For services which are provided during outpatient or home dialysis treatment pursuant to Sections 148.40(c)(2) or 148.40(c)(3) 148.40(a)(3) or (B) or (G) but are not defined as a routine service under 42 CFR 405.231(o) (1989), separate payment will be made to independent laboratories, pharmacies, and medical supply providers pursuant to 89 Ill. Adm. Code 140.430 through 140.434, 140.440 through 140.450, and 140.475 through 140.481, respectively.
- 4) Payment for physician services relating to ESRDT will be made separately to physicians, pursuant to 89 Ill. Adm. Code 140.400.

d) Encounter Rate Hospitals

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.140(d) (continued)

1) Hospital Ambulatory Care Reimbursement

- A) For those encounter rate hospitals described in Sections 148.25(b)(2)(A) through (b)(2)(C), reimbursement for Hospital Ambulatory Care procedures, as described in subsection (b)(1) above, shall be in accordance with subsection (b)(4) above.
- B) For those encounter rate hospitals described in Section 148.25(b)(2)(C), reimbursement for outpatient indigent volume adjustment payments, as described in subsection (b)(5) above, shall be in accordance with subsection (b)(5) above.
- C) For those encounter rate hospitals described in Sections 148.25(b)(2)(A) and (b)(2)(B), the reimbursement described in subsection (f)(1)(A) above shall be adjusted in accordance with subsection (e)(7)(B) below.

2) Fee-For-Service Reimbursement

- A) For those encounter rate hospitals described in Sections 148.25(b)(2)(A) and (b)(2)(C), reimbursement shall be in accordance with subsection (a).
- B) For those encounter rate hospitals described in Section 148.25(b)(2)(B), the reimbursement described in subsection (d)(2)(A) above shall be adjusted in accordance with subsection (d)(7)(B) below.

3) End-Stage Renal Disease Treatment (ESRDT) Reimbursement

- A) Encounter rate hospitals, as described in Sections 148.25(b)(2)(A) through (b)(2)(C) above, shall be reimbursed for ESRDT services in accordance with subsection (c) above.
- B) For those encounter rate hospitals described in Sections 148.25(b)(2)(A) and (b)(2)(B), the reimbursement described in subsection (d)(3)(A) above shall be adjusted in accordance with subsection (d)(7)(B) below.

4) Encounter Rate Reimbursement - Hospital-Based

- A) For those encounter rate hospitals described in Section 148.25(b)(2)(B) that do not qualify as Healthy Moms/Healthy

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.140(d)(4)(A) (continued)

Kids managed care clinics, as described in 89 Ill. Adm. Code 140.461(f) and Section 148.25(b)(5), reimbursement for outpatient and hospital-based clinic services provided to individuals over the age of 20, with the exception of those services described in subsections (a)(1)(A), (b)(1)(B), and (a)(1)(D) of this Section, shall be reimbursed on an all-inclusive per encounter rate basis as follows:

i) The all-inclusive per encounter rate shall be calculated based upon mean outpatient/clinic payments to Chicago major teaching hospitals for dates of service paid in February through April, 1990.

ii) The all-inclusive per encounter rate calculated in accordance with subsection (d)(4)(A)(i) above, shall be adjusted in accordance with subsection (d)(7)(A) below.

B) For those encounter rate hospitals described in Section 148.25(b)(2)(B) that do not qualify as Healthy Moms/Healthy Kids managed care clinics, as described in 89 Ill. Adm. Code 140.461(f) and Section 148.25(b)(5), reimbursement for outpatient and hospital-based clinic services provided to individuals under the age of 20, with the exception of those services described in subsections (a)(1)(A), (a)(1)(B), and (a)(1)(D) of this Section, shall be reimbursed on an all-inclusive per encounter rate basis as follows:

i) The all-inclusive per encounter rate shall be calculated based upon mean outpatient/clinic payments to Chicago major teaching hospitals that do not participate in the vaccine replacement program for dates of service paid in February through April, 1990.

ii) The all-inclusive per encounter rate calculated in accordance with subsection (d)(4)(B)(i) above, shall be adjusted in accordance with subsection (d)(7)(A) below.

5) Encounter Rate Reimbursement - County-Operated Outpatient Facilities

For those encounter rate hospitals described in Section 148.25(b)(2)(D) that do not qualify as Healthy Moms/Healthy Kids

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.140(d)(5) (continued)

managed care clinics, as described in 89 Ill. Adm. Code 140.461(f) and Section 148.25(b)(5), reimbursement for all services provided by county-operated outpatient facilities shall be reimbursed on an all-inclusive per encounter rate basis as follows:

A) Base Rate. The per encounter base rate shall be calculated as follows:

i) Allowable direct costs shall be divided by the number of direct encounters to determine an allowable cost per encounter delivered by direct staff.

ii) The resulting quotient, as calculated in subsection (d)(5)(A)(i) above, shall be multiplied by the Medicare allowable overhead rate factor to calculate the overhead cost per encounter.

iii) The resulting product, as calculated in subsection (d)(5)(A)(ii) above, shall be added to the resulting quotient, as calculated in subsection (d)(5)(A)(i) above to determine the per encounter base rate.

iv) The resulting sum, as calculated in subsection (d)(5)(A)(iii) above, shall be the per encounter base rate.

B) Supplemental Rate

i) The supplemental service cost shall be divided by the total number of direct staff encounters to determine the direct supplemental service cost per encounter.

ii) The supplemental service cost shall be multiplied by the allowable overhead rate factor. The allowable overhead rate factor is calculated by dividing the product derived in subsection (d)(5)(B)(ii) above by the quotient derived in subsection (d)(5)(B)(i) above.

iii) The quotient derived in subsection (d)(5)(B)(i) above, shall be added to the product derived in subsection (d)(5)(B)(ii) above, to determine the per encounter supplemental rate.

iv) The resulting sum, as described in subsection

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.140(d)(5)(B)(iv) (continued)

(d)(5)(B)(iii) above, shall be the per encounter supplemental rate.

C) Final Rate

ii) The per encounter base rate, as described in subsection (d)(5)(A)(iv), shall be added to the per encounter supplemental rate, as described in (d)(5)(B)(iv), to determine the per encounter final rate.

iii) The resulting sum, as determined in subsection (d)(5)(C)(i) above, shall be the per encounter final rate.

iv) The per encounter final rate, as described in subsection (d)(5)(C)(ii) above, shall be adjusted in accordance with subsection (d)(7)(A) below.

6) Healthy Moms/Healthy Kids Managed Care Clinics

For those encounter rate hospitals, as described in Section 148.25(b)(2), that qualify as Healthy Moms/Healthy Kids Managed Care Clinics, as described in 89 Ill. Adm. Code 140.461(f) and Section 148.25(b)(5), reimbursement shall be in accordance with 89 Ill. Adm. Code 140.464.

7) Rate Adjustments

In the case of encounter rate hospitals described in Sections 148.25(b)(2)(A), 148.25(b)(2)(B), and 148.25(b)(2)(D), rate adjustments shall be calculated as follows:

A) The reimbursement rates described in subsections (d)(1)(A) and (d)(2) through (d)(5) of this Section shall be no less than the reimbursement rates in effect on June 1, 1992, except that this minimum shall be adjusted on the first day of July of each year by the annual percentage change in the per diem cost of inpatient hospital services as reported on the two most recent annual Medicaid cost reports. The per diem cost of inpatient hospital services shall be calculated by dividing the total allowable Medicaid costs by the total allowable Medicaid days.

B) The rate adjustment described in subsection (d)(7)(A) above

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.140(d)(7)(B) (continued)

shall apply to the reimbursement rates described in subsections (d)(1)(A), (d)(2) and (d)(3) above and 89 Ill. Adm. Code 140.464(a) and 140.464(b)(1); however, such rate adjustment shall be applied retrospectively.

8) Encounter rate hospitals shall be required to submit outpatient cost reports to the Department within 90 days of the close of the encounter rate hospital's fiscal year. With the exception of the retrospective rate adjustment described in subsection (b)(7)(B), no year-end reconciliation for outpatient and clinic services is made.

9) Services are available to all clients in geographic areas in which an encounter rate hospital or a county-operated outpatient facility is located. All specific client coverage policies (relating to client eligibility and scope of services available to those clients) which pertain to the service billed are applicable to encounter rate hospitals in the same manner as to hospitals reimbursed under the Ambulatory Care Program and to non-hospital and hospital providers who bill and receive reimbursement on a fee-for-service basis.

e) Reimbursement for encounter rate hospital-outpatient and hospital-based clinic services is on a fee-for-service basis except for those services that meet the definition of the Hospital Ambulatory Care Program as described in subsection (e)(4), and except as described in subsection (b) for ESRDT Services, subsection (e)(5) for encounter rate hospitals described in Section 148.25(b)(2)(B), and subsection (e)(6) for county-operated outpatient facilities described in Section 148.25(b)(2)(D).

1) Effective July 1, 1990, encounter rate hospitals are defined as those hospitals described in Section 148.25(b)(2)(B).

2) Effective July 1, 1991, encounter rate hospitals are defined as:

- A) those hospitals described in Section 148.25(b)(2)(A), or
 - B) those hospitals described in Section 148.25(b)(2)(B), or
 - C) those county-operated outpatient facilities described in Section 148.25(b)(2)(D).
- 3) Effective September 1, 1991, encounter rate hospitals are defined as:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.140(c)(3) (continued)

- A) these hospitals described in Section 148.25(b)(2)(A) or
- B) these hospitals described in Section 148.25(b)(2)(B) or
- C) these hospitals described in Section 148.25(b)(2)(C) or
- D) these county-operated outpatient facilities described in Section 148.25(b)(2)(D)
- 4) For encounter-rate hospitals with the exception of those county-operated outpatient facilities described in Section 148.25(b)(2)(D), a Hospital Ambulatory Care list defines those technical procedures that require the use of the hospital outpatient setting, its technical staff and/or equipment. This list is updated periodically. The procedures are grouped according to type and complexity, each with a separate rate structure as follows:
- A) High-level technology surgeries are reimbursed at the lesser of charges or the hospital's alternate reimbursement rate as defined in Section 148.270(a), equivalent to the rate of a one-day inpatient stay.
- B) Certain non-surgical, very-high-level technology services recognized and approved by the Department as safe outpatient procedures will be reimbursed in a category separate from other specialized cardiac and diagnostic procedures and will be reimbursed at the lesser of charges or one of two separate rate maximums depending upon whether the hospital is classified as:
- i) a children's hospital, as defined in 89-III-Adm-Code 149.50(e)(2) or a major teaching hospital, as defined in Section 148.25(b) or
- ii) with the exception of a children's hospital, as defined in 89-III-Adm-Code 149.50(e)(2), a hospital defined in Section 148.25(e) through (f).
- C) Other surgical, specialized cardiac and diagnostic procedures will be reimbursed at the lesser of charges or one of two separate rate maximums depending upon whether the hospital is classified as:
- i) a children's hospital, as defined in 89-III-Adm-Code 149.50(e)(2) or a major teaching hospital, as defined in

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.140(c)(4)(C)(i) (continued)

- in Section 148.25(d) or
- ii) with the exception of a children's hospital, as defined in 89-III-Adm-Code 149.50(e)(2), a hospital defined in Section 148.25(e) through (f).
- D) Specialized treatment procedures, observation services, high-risk, and emergency room services will be reimbursed at the lesser of charges or a set rate maximum, or one of two separate rate maximums depending upon whether the hospital is classified as:
- i) a children's hospital, as defined in 89-III-Adm-Code 149.50(e)(2) or a major teaching hospital, as defined in Section 148.25(d) or
- ii) with the exception of a children's hospital, as defined in 89-III-Adm-Code 149.50(e)(2), a hospital defined in Section 148.25(e) through (f) and
- iii) whether the service is provided in the outpatient, general clinician, psychiatric clinic, or rehabilitation clinic department.
- 5) For an encounter-rate hospital described in Section 148.25(b)(2)(B), all outpatient and hospital-based clinic services not described in subsection (b)(4) above are reimbursed at a set rate maximum.
- 6) For county-operated outpatient facilities described in Section 148.25(b)(2)(D), all outpatient services are reimbursed at a set rate maximum.
- 7) Effective October 1, 1993, and in subsequent years, effective the first day of July of each year, reimbursement rates described in subsections (4) through (6) above shall be adjusted by the annual percentage change in the per-diem cost of inpatient hospital services as reported in the most recent annual Medicaid cost report.
- 8) Encounter-rate hospitals are required to submit outpatient cost reports to the Department within 90 days after the close of the hospital's fiscal year. The Department shall recompute encounter-rate hospital reimbursement rates to the amount described in subsection (4) above.

Section 148.150(c)(2) (continued)

VI of the Public Aid Code) or Aid to the Medically Indigent (Article VII of the Public Aid Code).

- 3) The dollar amount of Medicaid charges rendered in the period described above.
- 4) The dollar amount of total charges for care rendered in the period described above.

d) For the period August 1, 1992, through September 30, 1992, the hospital's uncompensated care payment shall be calculated in accordance with Section 148.20(b). This payment is contingent upon the Department's receipt of the data described in subsection (c) above in accordance with the time limitation described in subsection (c) above.

e) Effective on or after October 1, 1992, as a condition of eligibility for an uncompensated care payment adjustment for the uncompensated care rate year, each hospital shall annually submit, on or before October 1 of the uncompensated care rate year (or on or before October 31, 1992, for the October 1992 uncompensated care rate year), the following information separated by inpatient and outpatient and (including hospital-based clinic services) information to the Department:

- 1) The dollar amount of uncompensated care charges rendered in the previous uncompensated care base year.
- 2) The dollar amount of charges rendered in the previous uncompensated care base year that are reimbursable by the Department for those program participants covered under the Family and Children Assistance Program, formerly known as the General Assistance Program (Article VI of the Public Aid Code).
- 3) The dollar amount of Medicaid charges rendered in the previous uncompensated care base year.
- 4) The dollar amount of total charges for care rendered in the previous uncompensated care base year.

f) Effective on or after October 1, 1992, as a condition of eligibility for an uncompensated care payment adjustment for the uncompensated care rate year, hospitals that did not comply with the data requirements described in subsection (c) above shall submit, on or before October 31, 1992, the data required under subsection (c) above

Section 148.140(c) (continued)

9) Services are available to all clients in geographic areas in which an encounter rate hospital is located.

10) All specific client coverage policies (relating to client eligibility and scope of services available to those clients) which pertain to the service billed are applicable to encounter rate hospitals in the same manner as to hospitals reimbursed under the Ambulatory Care Program and to non-hospital and hospital providers who bill and receive reimbursement on a fee-for-service basis.

11) Inpatient restricted procedures as provided in subsection (a) shall apply to encounter rate hospitals.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.150 Uncompensated Care Payment Adjustments

a) The Department shall make uncompensated care payments to qualified hospitals that are reimbursed under Sections 148.170, 148.250 through 148.300 of 89 Ill. Adm. Code 149. The Department shall adjust each of these uncompensated care payments to ensure that aggregate payments do not exceed the amount that can reasonably be estimated would have been paid under Medicare payment principles, in compliance with 42 CFR 447.272, Application of Upper Payment Limits.

b) For the period August 1, 1991 through September 30, 1992, July 31, 1992, the hospital's uncompensated care payment shall be calculated and paid in accordance with the statutes and administrative rules governing the time period when the services were rendered.

c) As a condition of eligibility for an uncompensated care payment adjustment during the August 1, 1991, uncompensated care rate year, each hospital shall submit, on or before October 1 of the uncompensated care rate year January 15, 1992, the following information separated by inpatient and outpatient and (including hospital-based clinic services) information to the Department for the period August 1, 1990 through July 31, 1991:

- 1) The dollar amount of uncompensated care charges rendered in the period described above.
- 2) The dollar amount of charges rendered during this period reimbursed by the Department under General Assistance (Article

Section 148.150(e) (continued)

in addition to the data required under subsection (d) (e) above. Effective on or after October 1, 1993, as a condition of eligibility for an uncompensated care payment adjustment for the uncompensated care rate year, hospitals that did not comply with the data requirement described in subsection (e) above for the previous uncompensated care rate year shall submit, on or before October 1 of the uncompensated care rate year, the data required under subsection (c) above for the initial previous uncompensated care base rate year shall be required to submit, by the first day of October of the uncompensated care rate year, the data described in subsection (c) above in addition to the data required under subsection (d) (e) above.

f)g) The data submitted under subsections (c), (d) and (e) and (f) above shall be contain a statement for the uncompensated care rate year signed by the chief financial officer or chief executive officer certifying to the accuracy of the data submitted.

g)h) Effective with the on or after October 1, 1992, uncompensated care rate year, all hospitals that are reimbursed under Sections 148.170, 148.250 through 148.300, or 89 Ill. Adm. Code 149 that are required to submit cost reports in accordance with Section 148.210(a) shall be eligible for an uncompensated care payment adjustment for the uncompensated care rate year subject to the reporting requirements of subsections (c), (d) and (e) and (f) above, and the provisions of subsection (i) subsection (a) below. The uncompensated care payment for the uncompensated care rate year shall be calculated by multiplying the number of Medicaid days, excluding days for normal newborns, provided by the hospital in the uncompensated care base fiscal year which were subsequently adjudicated by the Department through the last day of June preceding the uncompensated care rate year and contained within the Department's paid claims data base by \$52.65.

h) Effective on or after October 1, 1993, all hospitals that are reimbursed under Sections 148.250 through 148.300, or 89 Ill. Adm. Code 149 that are required to submit cost reports in accordance with Section 148.210(a) shall be eligible for an uncompensated care payment adjustment for the uncompensated care rate year subject to the reporting requirements of subsections (c), (d) and (e) above, and the provisions of subsection (i) below. The uncompensated care payment for the uncompensated care rate year shall be calculated by multiplying the number of Medicaid days, excluding days for normal newborns, provided by the hospital in the uncompensated care base fiscal year which were subsequently adjudicated by the Department through the last day of June preceding the uncompensated care rate

Section 148.150(h) (continued)

year and contained within the Department's paid claims data base by \$52.65.

i) In addition to the amount calculated in subsections (g) and (h) above, for the period July 1, 1993, through June 30, 1994, each hospital shall receive an additional uncompensated care payment adjustment. This additional uncompensated care payment adjustment shall be calculated by dividing \$16.5 million by the number of Medicaid days, excluding days for normal newborns, provided by all hospitals in the uncompensated care base fiscal year which were subsequently adjudicated by the Department through the last day of June preceding the uncompensated care rate year and contained within the Department's paid claims data base.

j)k) Effective on or after October 1, 1992, a hospital will not be eligible for an uncompensated care payment adjustment under this Section for the uncompensated care rate year if the data supplied under subsections (c), (d) and (e) and (f) above indicate a significant decrease in the level of uncompensated care utilization rate. This determination will be made by comparing the level of uncompensated care provided in the immediately previous uncompensated care base year to the level of uncompensated care provided in the initial base year of August 1, 1990, through July 31, 1991. For purposes of this determination, uncompensated care in the base year of August 1, 1990, through July 31, 1991, and in subsequent uncompensated care base years shall, in addition to its usual definition, include charges for services reimbursable by the Department under the Family and Children Assistance Program, formerly known as General Assistance (Article VI), and Aid to the Medically Indigent (formerly Article VII). For example, eligibility for a payment adjustment for the uncompensated care rate year beginning October 1, 1992, shall be subject to a determination that there is not a significant decrease in the level of uncompensated care utilization rate provided from August 1991 through July 1992 as compared to the level of uncompensated care provided from August 1990 through July 1991. Factors which the Department may consider in determining whether a significant decrease in uncompensated care has occurred may include, but not be limited to, a change in socioeconomic characteristics of the community.

k)l) Reimbursement for uncompensated care payment adjustments shall be made on a quarterly basis, payable to the hospital in the quarter following each quarter for which the hospital is entitled to an uncompensated care payment adjustment.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.150 (continued)

1) All hospitals eligible for an uncompensated care payment adjustment shall be deemed to have met the requirements of Section 5-17 of the Public Aid Code that hospitals provide equal access to available services to low-income persons who are eligible for assistance under Articles V, VI and VII of the Public Aid Code. Nothing in this subsection shall be construed to imply that a hospital that is ineligible for an uncompensated care payment adjustment has not met the requirements of Section 5-17 of the Public Aid Code.

m) Inpatient Payment Adjustments Based Upon Uncompensated Care Payment Adjustment Reviews. Appeals based upon a hospital's ineligibility for the uncompensated care payment adjustments described in this Section, or their payment adjustment amounts, in accordance with Section 148.310, which result in a change in a hospital's eligibility for uncompensated care payment adjustments or a change in a hospital's uncompensated care payment adjustment amounts, shall not affect the uncompensated care payment adjustments of any other hospital or the payment adjustment amount of any other hospital that has received notification from the Department of their eligibility for uncompensated care payment adjustments based on the requirements of this Section.

n) Definitions

- 1) "Medicaid charges" means hospital charges for inpatient, outpatient and hospital-based clinic services provided to recipients of medical assistance under Title XIX of the Social Security Act.
- 2) "Medicaid Days" means hospital days reimbursed by the Department for recipients of medical assistance under Title XIX of the Social Security Act.
- 3) "Total charges" means the total amount of a hospital's charges for inpatient, outpatient and hospital-based clinic services it has provided.
- 4) "Uncompensated care base fiscal year" means, for example, State Fiscal Year 1991, for the October 1, 1992, uncompensated care rate year, State Fiscal Year 1992, for the October 1, 1993, uncompensated care rate year, etc.
- 5) "Uncompensated care base year" means August 1 through July 31 of each year, beginning with the initial August 1, 1990, through July 31, 1991, base year.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.150(n) (continued)

6) "Uncompensated care charges" for a hospital means:

A) the hospital's charges for inpatient, outpatient and hospital-based clinic services for which the hospital was not reimbursed by either the patient or a third party (including the Department);

B) less:

i) the amount of the hospital's bad debt recoveries for inpatient, outpatient and hospital-based clinic services; and

ii) the hospital's charges attributable to inpatient, outpatient and hospital-based clinic services that if provided without charge or at reduced charges under its obligation under the federal Hill-Burton Act (42 U.S.C. 291 et seq.).

7) "Uncompensated care rate year" means October 1 through September 30 of each year, beginning with the October 1, 1992 rate year.

8) "Uncompensated care utilization rate" means a fraction, the numerator of which is the hospital's uncompensated care charges provided in a given twelve month period, and the denominator of which is the hospital's total charges in that same period. In this paragraph, the term "uncompensated care charges" shall include, in addition to its usual definition, charges for services reimbursable by the Department under the Family and Children Assistance Program, formerly known as General Assistance (Article VI), and Aid to the Medically Indigent (formerly Article VII).

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.160 Payment Methodology for County-Owned Hospitals in an Illinois County with a Population of Over 3 Million

a) Reimbursement Methodology

In accordance with 89 Ill. Adm. Code 149.50 (c)(8), county-owned hospitals in an Illinois county with a population greater than three million are excluded from the DRG PPS and are reimbursed in accordance with this section.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.160 (continued)

b) Base Year Costs

- 1) The hospitals' Each-hospital's base year operating costs shall be the-Medicare-cost-per-diem contained in the hospitals' hospital's audited cost reports (see 42 CFR 447.260 and 447.265 (1982)) for hospitals fiscal years ending between 20 19 and 31 39 months prior to the fiscal year for which rates are being set (i.e., calendar year-1989-for-fiscal-year-1992-rates, calendar year-1990-for-fiscal-year-1993-rates, etc.). In-the-event-that an-audited-cost-report-is-not-available-at-the-time-rates-are calculated, the-unaudited-report-for-the-applicable-period-shall be-used-for-the-calculation-of-interim-rates. Upon-completion of-the-audit, the-rates-shall-by-re-calculated. Payments-made under-the-interim-rate-shall-be-reconciled.

- 2) The hospitals' Each-hospital's base year capital related costs shall be derived from the same audited cost reports report used for operating costs in subsection (b)(1) above.

- 3) The hospitals' Each-hospital's base year direct medical education costs shall be derived from the same audited cost reports report used for operating costs in subsection (b)(1) above.

- 4) Each-hospital's The base year cost per diem costs shall be the sum of the hospital's operating cost per diem costs, capital related cost per diem costs and medical education cost per diem costs defined in subsections (b)(1) through (b)(3).

- 5) For-new New hospitals, for which a base year cost report is not on file, the-Department will be reimbursed the per diem rate calculated in subsection (b)(4) above and inflated in subsection (d)(1) below. use-a-more-recently-filed-cost-report-if-no cost-report-is-on-file, the-hospital's-estimate-of-costs adjusted-as-necessary-according-to-experience-with-hospitals-of similar-size, location-and-service-intensity. The-Department will-re-calculate-any-reimbursement-rate-based-on-a-rate estimated-as-soon-as-a-cost-report-becomes-available. The re-calculated rate-will-be-effective-for-the-entire-fiscal-year and-the-Department-will-retroactively-adjust-payments-if reported-costs-are-not-consistent-with-the-estimate-on-which-the payments-are-based.

c) Restructuring Adjustments

Section 148.160(c) (continued)

Adjustments to the base year cost per diem, as described in subsection (b)(4) above. Base-year-costs will be made to reflect restructuring since filing the base year cost reports report. The restructuring must have been mandated to meet state, federal or local health and safety standards. The allowable Medicare/Medicaid costs (see 42 CFR Part 405, Subpart D, 1982) must be incurred as a result of mandated restructuring and identified from the most recent audited cost reports report available before or during the rate year. The restructuring costs must be significant, i.e., on a per unit basis; they must constitute one percent or more of the total allowable Medicare/Medicaid unit costs for the same time period. The Department will use the most recent available audited cost reports report to determine restructuring costs. If an audited cost reports report become becomes available during the rate year, the reimbursement rate will be recalculated at that time to reflect restructuring cost adjustments. For audited reports received at the Office of Health Finance, Illinois Department of Public Aid, between the first and fifteenth of the month, the effective date of the recalculated rate will be the first day of the following month. For audited reports received at the Finance Section between the sixteenth and last day of the month, the effective date will be the first day of the second month following the month the reports are report is received. Allowable restructuring costs are adjusted to account for inflation from the midpoint of the restructuring cost reporting year to the midpoint of the base year according to the index and methodology of Data Resources, Inc. (DRI), national hospital market basket price proxies and added to the base year cost per diem, as described in subsection (b)(4), which is subject to the inflation adjustment described in subsection (d) below base-year-costs.

d) Inflation Adjustment For Base Year Cost Report Inflator

- 1) The base year cost per diem, as defined in subsection (b)(4) above, shall be inflated from the midpoint of the hospitals' base year to the midpoint of the time period for which rates are being set (rate period) according to the historical rate of annual cost increases. The historical rate of annual cost increases shall be calculated by dividing the operating cost per diem as defined in subsection (b)(1) above by the previous year's operating cost per diem.
- 2) Effective October 1, 1992, and-in-subsequent-years, effective the-first-day-of-July-of-each-year, base-year-costs, including any-adjustments-for-mandated-restructuring, shall-be-adjusted-by the-annual-percentage-change-in-the-per-diem-cost-of-inpatient hospital-services-as-reported-in-the-most-recent-annual-Medicare-

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.160(d)(2) (continued)

cost reports, however, in no instance shall the adjusted rate effective October 1, 1992, and thereafter, be less than the rate in effect on June 1, 1992, the final reimbursement rate shall be no less than the reimbursement rate in effect on June 1, 1992, except that this minimum shall be adjusted each July 1 thereafter by the annual percentage change in the per diem cost of inpatient hospital services as reported in the most recent annual Medicaid cost reports.

e) Review Procedure

The review procedure shall be in accordance with Section 148.310.

f) Applicable Adjustments for DSH Hospitals

1) The criteria and methodology for making applicable adjustments to DSH hospitals which are exempt from the DRG PPS as described in subsection (a) above, shall be in accordance with Section 148.120.

2) In addition to the DSH payment adjustments described in Section 148.120, hospitals reimbursed under this Section shall have supplemental DSH payments calculated by multiplying the sum of the base year cost per diem, as described in subsection (b)(4) above, as adjusted for restructuring, as described in subsection (c) above, and as adjusted for inflation, as described in subsection (d) above, and hospital's base year costs plus the calculated disproportionate share per diem payment adjustment adjustments per diem from as described in Section 148.120 by the hospitals' hospital's percentage of inpatient days which are not reimbursed by a third party payer. Effective October 1, 1992, and in subsequent years, effective the first day of July of each year, the supplemental DSH payments calculated under this subsection shall be no less than the supplemental DSH rates in effect on June 1, 1992, except that this minimum shall be adjusted as of July 1, 1992, and on the first day of July of each year thereafter, by the annual percentage change in the per diem cost of inpatient hospital services as reported in the most recent annual Medicaid cost reports; however, in no instance shall the supplemental DSH payments calculated effective October 1, 1992, and thereafter, be less than the supplemental DSH payments in effect on June 1, 1992. The per diem cost of inpatient hospital services is calculated by dividing the total allowable Medicaid cost by the total allowable Medicaid days. The supplemental DSH payment adjustment shall be paid on a per diem basis and shall be

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.160(f)(2) (continued)

applied to each covered day of care provided.

g) Outlier Adjustments

Outlier adjustments to payment amounts for medically necessary inpatient hospital services involving exceptionally high costs for certain individuals shall be made in accordance with Section 148.130.

h) Trauma Center Adjustments. Trauma center adjustments shall be made in accordance with Section 148.290(c).

i) Reductions to Total Payments

1) Copayments. Copayments are assessed under all medical programs administered by the Department except the Family and Children Assistance Program, formerly known as the General Assistance Program, and shall be assessed in accordance with Section 148.190.

2) Third Party Payments. The requirements of Section 148.290(j)(2) 148.290(e)(2) shall apply.

j) Prepayment and Utilization Review

Prepayment and utilization review requirements shall be in accordance with Section 148.240.

k) Cost Reporting Requirements

Cost reporting requirements shall be in accordance with Section 148.210.

l) Rate Period

The rate period for hospitals reimbursed under this Section shall be the 12 month period beginning on October 1 of the year and ending September 30 of the following year.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.170 Payment Methodology for State-Owned Hospitals in an Illinois County with a Population of Over 3 Million

a) In accordance with 89 Ill. Adm. Code 149.50(c)(8), state-owned

NOTICE OF PROPOSED AMENDMENTS

Section 148.170(a) (continued)

hospitals in an Illinois county with a population greater than three million are excluded from the DRG PPS and are reimbursed in accordance with this section.

b) Base Year Costs

1) Each hospital's base year cost per diem shall be derived from audited cost reports (see 42 CFR 447.260 and 447.265 (1982)) for hospitals' fiscal years ending between 19 and 30 months prior to the fiscal year for which rates are being set (i.e., Calendar Year 1989 for Fiscal Year 1992 rates, Calendar Year 1990 for Fiscal Year 1993 rates, etc.) will be used to define base year costs.

2) For new hospitals for which a base year cost report is not on file, the Department will use a more recent filed cost report or, if no cost report is on file, the hospital's estimate of costs, adjusted as necessary according to experience with hospitals of similar size, location and service intensity. The Department will recalculate any reimbursement rate based on a rate estimated as soon as a cost report becomes available. The recalculated rate will be effective for the entire fiscal year and the Department will retroactively adjust payments if reported costs are not consistent with the estimate on which the payments are based.

c) Restructuring Adjustment

Adjustments to base year costs will be made to reflect restructuring since filing the base year cost report. The restructuring must have been mandated to meet state, federal or local health and safety standards. The allowable Medicare/Medicaid costs (see 42 CFR Part 405, Subpart D, 1982) must be incurred as a result of mandated restructuring and identified from the most recent audited cost report available before or during the rate year. The restructuring costs must be significant, i.e., on a per unit basis; they must constitute one percent or more of the total allowable Medicare/Medicaid unit costs for the same time period. The Department will use the most recent available audited cost report to determine restructuring costs. If an audited cost report becomes available during the rate year, the reimbursement rate will be recalculated at that time to reflect restructuring cost adjustments. For audited reports received at the Office of Health Finance, Illinois Department of Public Aid, between the first and fifteenth of the month, the effective date of the recalculated rate will be the first day of the following month.

NOTICE OF PROPOSED AMENDMENTS

Section 148.170(c) (continued)

For audited reports received at the Finance Section between the sixteenth and last day of the month, the effective date will be the first day of the second month following the month the report is received. Allowable restructuring costs are adjusted to account for inflation from the midpoint of the restructuring cost reporting year to the midpoint of the base year according to the index and methodology of Data Resources, Inc. (DRI), national hospital market basket price proxies and added to the base year costs.

d) Inflation Adjustment For Base Year Cost Report Inflator

Base year costs, including any adjustments for mandated restructuring, will be updated from the midpoint of each hospital's base year to the midpoint of the fiscal year rate-period for which rates are being set according to the hospital's historical rate of annual cost increases. The historical rate of increase will be equal to the average yearly compounded increase in cost report cost per diems, and calculated using the base year and the four hospital fiscal years preceding the base year index-and-methodology-of-Data Resources, Inc. (DRI), national market-basket-price-proxies.

e) Review Procedure

The review procedure shall be in accordance with Section 148.310.

f) Applicable adjustments for DSH Hospitals and Uncompensated Care

- 1) The criteria and methodology for making applicable adjustments to DSH hospitals which are exempt from the DRG PPS as described in subsection (a) above, shall be in accordance with Section 148.120. The criteria and methodology for making applicable adjustments for uncompensated care shall be in accordance with Section 148.150.
- 2) Effective October 1, 1993, in addition to the DSH payment adjustments described in Section 148.120, hospitals reimbursed under this Section shall have supplemental DSH payments calculated by multiplying the sum of the hospital's base year costs, as described in subsection (b) above, as adjusted for restructuring, as described in subsection (c) above and as adjusted for inflation, as described in subsection (d) above, and the calculated disproportionate share per diem payment adjustment as described in Section 148.120 by the hospital's percentage of inpatient days which are not reimbursed by a third party payer. The resulting product shall be multiplied by two

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.170(f)(2) (continued)

and this amount shall be the supplemental DSH payment adjustment which shall be paid on a per diem basis and shall be applied to each covered day of care provided.

g) Outlier Adjustments

Outlier adjustments to payment amounts for medically necessary inpatient hospital services involving exceptionally high costs for certain individuals shall be made in accordance with Section 148.130.

h) Reductions to Total Payments

1) Copayments. Copayments are assessed under all medical programs administered by the Department except the Children and Family Assistance Program, formerly known as the General Assistance Program, and shall be assessed in accordance with Section 148.190.

2) Third Party Payments. The requirements of Section 148.290(j)(2) 148.290(e)(2) shall apply.

i) Prepayment and Utilization Review

Prepayment and utilization review requirements shall be in accordance with Section 148.240.

j) Cost Reporting Requirements

Cost reporting requirements shall be in accordance with Section 148.210.

k) Rate Period

The rate period for hospitals reimbursed under this Section shall be the 12 month period beginning on October 1 of the year and ending September 30 of the following year. In the event that an audited cost report is not available at the time rates are calculated, the unaudited report for the applicable period shall be used for the calculation of interim rates. Upon completion of the audit, the rates shall be reconciled. Payments made under the interim rate shall be reconciled.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.180 Payment for Pre-operative Days, Patient Specific Orders, and Services Which Can Be Performed in an Outpatient Setting

a) Pre-Operative Days. For hospitals and distinct part units reimbursed on a per diem basis under Sections 148.160, 148.170 or 148.250 through 148.300, payment for pre-operative days shall be limited to the day immediately preceding surgery unless the attending physician has documented the medical necessity of an additional day or days. The documentation must be kept in the patient's medical record and must consist of a written notation made by the physician which documents that more than one pre-operative day is medically necessary.

b) Inpatient Procedures Requiring Justification

1) A list of restricted inpatient procedures has been established. These restricted inpatient procedures will only be reimbursed when performed outside the inpatient setting or when the hospital supplies justification for an inpatient admission that meets Departmental established criteria. These criteria include, but are not limited to: In accordance with Section 148.140(a)(4), payment for inpatient hospital services will not be made for procedures which have been identified as procedures which may be performed safely in an outpatient setting (i.e., without an admission to the hospital for an overnight stay) unless documentation in the patient's medical record indicates that:

A) Presence of medical conditions which make prolonged post-operative observations by a nurse or skilled medical personnel a necessity (e.g., heart disease, severe diabetes);

B) The patient is in the hospital as an inpatient for a medically necessary condition unrelated to the surgical procedure;

C) An unrelated procedure is being done simultaneously which itself requires surgical hospitalization. The patient is in the hospital as an inpatient for an unrelated procedure to be performed on an inpatient basis simultaneously;

D) The practitioner has documented the medical necessity of performing the patient's surgery in an inpatient setting;

E) The patient is unable to comprehend and/or follow the necessary instruction both prior to and following the procedure due to mental and/or physical impairment, and

NOTICE OF PROPOSED AMENDMENTS

Section 148.180(b)(1)(E) (continued)

this would result in inadequate treatment and place the patient at risk:

- F) Emergency admission or recent onset of severe symptoms would prohibit safely performing the procedure on an outpatient basis (e.g., bleeding, severe pain, nausea, vomiting); and
- G) Admission occurs subsequent to the performance of the procedure on an outpatient basis due to conditions such as:
 - i) Instability of vital signs;
 - ii) Respiratory distress greater than existed pre-operatively;
 - iii) Post-operative pain not relieved by oral medication;
 - iv) Uncontrolled bleeding;
 - v) Lack of state of consciousness appropriate to age and development;
 - vi) Presence of persistent nausea or vomiting; and
 - vii) Inability to ambulate consistent with age, previous mobility status and/or procedure.

- 2) The list of procedures identified as restricted inpatient procedures which may be safely performed outside the inpatient setting and do not require that an inpatient admission are would be reevaluated periodically annually.
- 3) Additions to and deletions from the list of designated restricted inpatient procedures will be made following notice to and consultations with the Department's professional advisory committees, State Medicaid Advisory Committee, representatives selected by the hospitals, other third party payors, the Illinois Hospital Association, and other interested groups or individuals.

c) Ancillary Services and Tests

- 1) Ancillary services and routine tests (those services other than routine room and board and nursing which are required because of

NOTICE OF PROPOSED AMENDMENTS

Section 148.180(c)(1) (continued)

the patient's medical condition, including lab tests and x-rays) shall not be covered unless there is a patient specific written order for the test from the attending or operating physician responsible for the care and treatment of the patient. The attending or operating physician responsible for the care and treatment of the patient is required to sign all applicable sections for each test ordered in the appropriate place in the medical record. The order must be legible and explain completely all services or tests to be performed. Standing orders are not acceptable.

- 2) Upon completion of the service or test, a fully documented description of results with findings, or the administration of medication, must be maintained in the patient medical records. Radiological services must have the actual x-rays and the interpretation report; laboratory/pathological tests must have the specific findings for each test; and drugs and pharmaceutical supplies must indicate strength, dosages and durations.
- 3) Charges for any and all such services or tests cannot exceed those charged to the general public. The failure to maintain and provide records as described in this Section shall result in the disallowance of the applicable charges upon audit.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.200 Alternate Reimbursement Systems

- a) Section 148.210 discusses cost reporting requirements for all hospitals participating in the Medicaid Program.
- b) Section 148.220 describes the payment methodology for hospital inpatient services to recipients for admissions occurring prior to September 1, 1991.
- c) The payments described in Sections 148.250 through 148.300 shall be effective for admissions on and after October 1, 1992. September 1, 1991, subject to the provisions of Section 148.20(b).
- d) The payments described in Section 148.82 148.80 shall be effective for admissions on and after September 1, 1991, with the exception of provisions that relate to pancreas or kidney-pancreas transplants. Provisions relating to pancreas or kidney-pancreas transplants shall

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.200(d) (continued)

be effective for admissions on and after July 1, 1992.

- e) Sections 148.250 through 148.300 describe the payment methodologies for hospital inpatient services to recipients of Medical Assistance provided by a hospital not reimbursed under the DRG Prospective Payment System (PPS) described in 89 Ill. Adm. Code 149 or the reimbursement methodologies described in Sections 148.82 148-80, 148.160 and 148.170.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.210 Filing Cost Reports

- a) All hospitals in Illinois, those hospitals in contiguous states providing 100 or more inpatient days of care to Illinois program participants, and all hospitals located in states contiguous to Illinois that elect to be reimbursed under the methodology described in 89 Ill. Adm. Code 149 (the DRG Prospective Payment System), shall be required to file Medicaid cost reports within 90 days of the close of that provider's fiscal year.

- b) The Department may grant a 30-day extension of the due date for good cause.

- c) The assessment or license fees described in 89 Ill. Adm. Code Sections 140.80, 140.82, 140.84, 140.94 and 140.95, may not be reported as allowable Medicaid costs on the Medicaid cost report.

- d) For a hospital that is electing to participate in the Illinois Medicaid Program and has not filed a Medicaid cost report before, the hospital must submit the two most recently audited Medicare cost reports at the time of enrollment.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.230 Admissions Occurring on or after September 1, 1991

Reimbursement to hospitals not reimbursed under the DRG PPS (see 89 Ill. Adm. Code 149) or the reimbursement methodologies established at Sections 148.82 148-80, 148.160 and 148.170 for inpatient admissions occurring on or after September 1, 1991, shall be calculated in accordance with Sections 148.250 through 148.300, subject to the provisions of Section 148.20(b).

(Source: Amended at 17 Ill. Reg. _____, effective _____)

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.240 Utilization Review and Furnishing of Inpatient Hospital Services Directly or Under Arrangements

a) Utilization Review

The Department, or its designee, may conduct preadmission, concurrent, prepayment, and postpayment reviews of:

- 1) The quality and nature of the utilization of health services;
- 2) The medical necessity, reasonableness and appropriateness of inpatient hospital care for which additional payment is sought under outlier provisions;
- 3) The validity of the hospital's diagnostic and procedural information;
- 4) The completeness, adequacy and quality of the services furnished in the hospital; or
- 5) Other medical or other practices with respect to program participants or billing for services furnished to program participants.

b) Medical Review Notification

Hospitals shall be notified at least thirty-(30) days in advance of any preadmission, concurrent, or prepayment review requirements imposed by the Department.

c) Prepayment Review

The Department may require hospitals to submit claims to the Department for prepayment review and approval prior to rendering payment for services provided. Such prepayment review requirements will be focused on areas where the Department has substantial reason to suspect abuse (e.g., hospital billings deviate from the norm). The review may be conducted by the Department or its designated peer review agents. Prepayment review shall be used to determine the appropriateness and medical necessity of the inpatient stay. Payment shall not be made unless the medical necessity of the inpatient stay can be documented. The Department shall notify the hospital by letter or Department Informational Notice of the designated services which shall be subject to prepayment review. The prepayment review requirement shall commence thirty-(30) days after the Department has given notice to the hospital of the designated services which shall be reviewed.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.240 (continued)

d) Postpayment Review

Postpayment review shall be conducted on a random sample of hospital stays following reimbursement to the hospital for the care provided. The Department may also conduct postpayment review on specific types of care.

e) Hospital Utilization Control. Hospitals and distinct part units that participate in Medicare (Title XVIII) must use the same utilization review standards and procedures and review committee for Medicaid as they use for Medicare. Hospitals and distinct part units that do not participate in Medicare (Title XVIII) must meet the utilization review plan requirements in 42 CFR, Ch. IV, Part 456, Subparts C, D, or E (October 1, 1991). Utilization control requirements for inpatient psychiatric hospital care in a psychiatric hospital, as defined in 89 Ill. Adm. Code 149.50(c)(1) shall be in accordance with federal regulations at 42 CFR, Ch. IV, Part 456, Subpart G (October 1, 1991).

f) Denial of Payment as a Result of Admissions, Length of Stay, Transfers and Quality Review

1) If the Department determines that a hospital has misrepresented admissions, length of stay, discharges, or billing information, or has taken an action that results in the unnecessary admission or inappropriate discharge of a program participant, unnecessary multiple admissions of a program participant, unnecessary transfer of a program participant, or other inappropriate medical or other practices with respect to program participants or billing for services furnished to program participants, the Department may, as appropriate:

- A) Deny payment (in whole or in part) with respect to inpatient hospital services provided with respect to such an unnecessary admission, inappropriate length of stay or discharge, subsequent readmission or transfer of an individual.
- B) Require the hospital to take action necessary to prevent or correct the inappropriate practice.

C) Perform prepayment review in accordance with Section 148.240(c) 148.240(b).

2) When payment with respect to the discharge of an individual patient is denied by the Department or its designee, under

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.240(f)(2) (continued)

subsection (f)(1)(A), a reconsideration will be provided within 30 days upon the request of a practitioner or provider if such request is the result of the designee's own medical necessity or appropriateness of care denial determination and is received within 60 days of the Advisory Notice. The date of the Advisory Notice is counted as day one.

3) A determination under subsection (f)(1) above, if it is related to a pattern of inappropriate admissions, length of stay and billing practices that has the effect of circumventing the prospective payment system, may result in:

- A) withholding Medicaid payment (in full or in part) to the hospital until the hospital provides adequate assurances of compliance; or
- B) termination of the hospital's Provider Agreement.

g) Furnishing of Inpatient Hospital Services Directly or Under Other Arrangements

1) The applicable payments made under Sections 148.82 148-80, 148.120, 148.130, 148.150, 148.160, 148.170 and 148.250 through 148.300 are payment in full for all inpatient hospital services other than for the services of nonhospital-based physicians to individual program participants and the services of certain hospital-based physicians as described in subsections (g)(1)(B)(i) through (g)(1)(B)(v) below.

- A) Hospital-based physicians who may not bill separately on a fee-for-service basis:
 - i) A physician whose salary is included in the hospital's cost report for direct patient care may not bill separately on a fee-for-service basis.
 - ii) A teaching physician who provides direct patient care may not bill separately on a fee-for-service basis if the salary paid to the teaching physician by the hospital or other institution includes a component for treatment services.
- B) Hospital-based physicians who may bill separately on a fee-for-service basis:

NOTICE OF PROPOSED AMENDMENTS

DEPARTMENT OF PUBLIC AID

Section 148.240(g)(1)(B) (continued)

- i) A physician whose salary is not included in the hospital's cost report for direct patient care may bill separately on a fee-for-service basis.
- ii) A teaching physician who provides direct patient care may bill separately on a fee-for-service basis if the salary paid to the teaching physician by the hospital or other institution does not include a component for treatment services.
- iii) A resident may bill separately on a fee-for-service basis when, by the terms of his or her contract with the hospital, he or she is permitted to and does bill private patients and collect and retain the payments received for those services.
- iv) A hospital-based specialist who is salaried, with the cost of his or her services included in the hospital reimbursement costs, may bill separately on a fee-for-service basis when, by the terms of his or her contract with the hospital, he or she may charge for professional services and do, in fact, bill private patients and collect and retain the payments received.
- v) A physician holding a nonteaching administrative or staff position in a hospital or medical school may bill separately on a fee-for-service basis to the extent that he or she maintains a private practice and bills private patients and collects and retains payments made.

- 2) Charges are to be submitted on a fee-for-service basis only when the physician seeking reimbursement has been personally involved in the services being provided. In the case of surgery, it means presence in the operating room, performing or supervising the major phases of the operation, with full and immediate responsibility for all actions performed as a part of the surgical treatment.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.250

Determination of Alternate Payment Rates to Certain Exempt Hospitals

The exempt hospitals, defined in 89 Ill. Adm. Code 149.50(c)(1), (c)(2),

Section 148.250 (continued)

- (c)(4) and (c)(7), shall be reimbursed for inpatient hospital care provided to recipients by summing the following reimbursement calculations:
- a) allowable operating cost per diem;
- b) other costs (capital, and direct medical education, and CRNA costs) reimbursed on a per diem basis;
- c) applicable DSH adjustments as described in Section 148.120, uncompensated care adjustments as described in Section 148.150, and outlier adjustments as described in Section 148.130; and
- d) applicable trauma center adjustments, as described in 89 Ill. Adm. Code 148.290(c), and rehabilitation hospital adjustments, as described in 89 Ill. Adm. Code 148.290(d), perinatal center adjustments, as described in 89 Ill. Adm. Code 148.290(e), obstetrical care adjustments, as described in 89 Ill. Adm. Code 148.290(f), targeted access payment adjustments, as described in 89 Ill. Adm. Code 148.290(g), and Medicaid high volume adjustments, as described in 89 Ill. Adm. Code 148.290(h) 148-290(e)-through-(d).

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.260

Calculation and Definitions of Inpatient Per Diem Rates

- a) Calculation for the first rate year period
- 1) Allowable operating cost per diem

- A) The allowable operating cost per diem for a hospital, described in Section 148.250 148-250(a), and for hospitals or hospital units, described in Section 148.270(a) and (b), shall be calculated by taking the hospital's Medicaid inpatient operating costs for the base period as defined in Section 148.25(g)(1) divided by the hospital's Medicaid inpatient days.

- B) In the event that an audited cost report is not available at the time rates are calculated, the unaudited report for the applicable period shall be used for the calculation of interim rates. Upon completion of the audit, the rates shall be recalculated. Payments made under the interim rate shall be reconciled.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.260(a)(1) (continued)

B) Operating cost base per diem rates for hospital inpatient care provided to Medicaid recipients beginning September 1, 1991, shall be calculated by:

- i) Calculating each individual hospital's cost per diem less capital and direct medical education costs for each of the two most recent years for which an audited Medicaid cost report exists, as described in subsection (a)(1)(A) above.
 - ii) Each of the two costs per diem shall be trended forward to the midpoint of the rate period using the national hospital market basket price proxies (DRI).
 - iii) These two trended operating costs per diem are then added together and divided by two to calculate the hospital's final operating cost per diem for the base period.
- 2) Capital Related Costs. The capital related cost per diem for a hospital, described in Section 148.250, and for hospitals or hospital units, described in Section 148.270(a) and (b) 148.270(b), shall be calculated by taking the hospital's total capital related costs for the base period as defined in Section 148.25(g)(1) divided by the hospital's total inpatient days, trended forward to the midpoint of the rate period using the national hospital market basket price proxies (DRI).

A) These two trended capital related cost per diems are then added together and divided by two to calculate the hospital's adjusted capital related cost per diem.

B) The adjusted capital related cost per diem, as calculated in subsection (a)(2)(A) above, shall be rank ordered for all hospitals and capped at the 80th percentile.

C) Each hospital shall receive a per diem add-on for capital related costs which shall be equal to the amount calculated in subsection (a)(2)(A) or subsection (a)(2)(B) above, whichever is less.

3) Direct Medical Education Costs. The direct medical education cost per diem for a hospital, described in Section 148.250 148.260(a), and for hospitals or hospital units, described in Section 148.270(a) and (b), shall be calculated by taking total

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.260(a)(3) (continued)

inpatient direct medical education costs for the base period as defined in Section 148.25(g)(1) divided by the hospital's total inpatient days, trended forward to the midpoint of the rate period using the national hospital market basket price proxies (DRI).

A) The two trended direct medical education cost per diems are then added together and divided by two to calculate the hospital's adjusted direct medical education cost per diem.

B) The adjusted direct medical education cost per diem, as calculated in subsection (a)(3)(A) above, shall be rank ordered for all hospitals reporting such costs and capped at the 80th percentile.

C) Each hospital shall receive a per diem add-on for direct medical education costs which shall be equal to the amount calculated in subsection (a)(3)(A) or subsection (a)(3)(B) above, whichever is less.

4) CRNA-Costs

A) Only hospitals that qualify for these payments under the Medicare Program as of September 1, 1992, shall be eligible for these payments.

B) The CRNA cost per diem shall be calculated by taking the hospital's total CRNA costs for the base period as defined in Section 148.25(g)(1) divided by the hospital's total inpatient days, trended forward to the midpoint of the rate period using the national hospital market basket price proxies (DRI).

C) Each qualifying hospital, as described in subsection (a)(4)(A) above, shall receive a per diem add-on for CRNA costs which shall be equal to the amount calculated under subsection (a)(4)(B) above.

b) Calculation of Direct Medical Education Costs for Subsequent Rate Periods

1) Effective with rate periods beginning on or after April 1, 1994, hospitals will be separated into two peer groups for the purpose of computing direct medical education cost per diems.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.260(b) (continued)

2) For the purpose of computing the direct medical education cost per diems, all hospitals described in Section 148.25(d) shall be defined as major teaching hospitals. All other hospitals reporting direct medical education costs shall be defined as other teaching hospitals.

3) Effective with rate periods beginning on or after April 1, 1994, the adjusted direct medical education cost per diem for all hospitals in each peer group shall be calculated by utilizing the direct medical education cost per diems for each hospital that were in effect on June 30, 1993, under the methodology described in subsections (a)(3) and (a)(3)(A) of this Section.

A) The adjusted direct medical education cost per diem, as described in subsection (b)(3) above, shall be rank ordered for all hospitals reporting such costs within each peer group, and capped at the 80th percentile.

C) Each hospital shall receive a per diem add-on for direct medical education costs which shall be equal to the amount calculated in subsection (b)(3) or subsection (b)(3)(A) above, whichever is less, subject to the inflation adjustment described in subsection (c) of this Section.

c) Calculation for Subsequent Subsequent Rate Periods

1) For the rate period described in Section 148.25(g)(2)(A) periods beginning on or after October 1, 1992, the final rate per diem shall be determined by taking the operating, capital, and direct medical education and CRNA trended rate cost per diems calculated under subsection (a) of this Section for the base period and updating those costs by the national hospital market basket price proxies (DRI) to the midpoint of the rate period described in Section 148.25(g)(2)(A).

2) For rate periods beginning on or after April 1, 1994, as described in Section 148.25(g)(2)(B), the final rate per diem for a hospital described in 89 Ill. Adm. Code 149.125(b) shall be determined by:

A) Adding the operating and capital trended rate cost per diems calculated under subsection (a) of this Section that were in effect on June 30, 1993;

B) Adding the direct medical education trended rate cost per

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.260(c)(2)(B) (continued)

diem calculated under subsection (c) of this Section to the resulting sum described in subsection (c)(2)(A) above; and

C) Updating the trended rate cost per diems described in subsections (c)(2)(A) and (c)(2)(B) above;

i) In the case of a hospital described in 89 Ill. Adm. Code 149.125(b), by the national hospital market basket price proxies (DRI) to the midpoint of the rate period described in Section 148.25(g)(2)(B); and

ii) In the case of a hospital described in 89 Ill. Adm. Code 149.50(c)(1), (c)(2), or (c)(4), or for a hospital unit described in 89 Ill. Adm. Code 149.50(d)(1) or (d)(2), to the midpoint of the current rate period described in Section 148.25(g)(2)(B) by utilizing the TEFR price inflation factor.

d) Rebasing

For the rate period beginning after October 1, 1994, and every third rate period thereafter, the final rate per diem shall be calculated using:

1) The methodology set forth in subsection (a) of this Section for the calculation of operating and capital trended rate cost per diems using base period cost reports, as described in Section 148.25(g)(1); and the most recently available audited Medicare/Medicaid cost reports.

2) The methodology set forth in subsection (c) of this Section for the calculation of direct medical education trended rate cost per diems using base period cost reports, as described in Section 148.25(g)(1).

e) In the event that an audited cost report is not available at the time rates are calculated, the unaudited report for the applicable period shall be used for the calculation of interim rates. Upon completion of the audit, the rates shall be recalculated. Payments made under the interim rate shall be reconciled.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

NOTICE OF PROPOSED AMENDMENTS

Section 148.270

Determination of Alternate Cost Per Diem Rates For All Hospitals; and Payment Rates for Certain Exempt Hospital Units; and Payment Rates for Certain Other Hospitals

- a) Calculation of Alternate Cost Per Diem Rates for All Hospitals
- For all hospitals, regardless of the hospital's reimbursement methodology, the Department shall first calculate the hospital's alternate cost per diem rate, as calculated under Section 148.260, derived from the provider's base period cost reports, as described in Section 148.25(g)(1) two most recently audited inpatient-Medicare cost reports and the latest Medicare cost reports on file with the Department.

- b) Calculation of Payment Rates for Certain Exempt Hospital Units

- 1) For admissions occurring within the rate period described in Section 148.25(g)(2)(A):

A) In the case of a distinct part unit, as described in 89 Ill. Adm. Code 149.50(d), the Department shall divide the hospital's Medicaid charges per diem (identified on adjudicated paid claims submitted by the provider individual-hospital during the most recently completed fiscal year for which complete data are available) related to the distinct part unit by the hospital's total Medicaid charge charges per diem for all paid claims for from the same time period, and multiply the result by the hospital's total-Medicaid-alternate-payment-rate--For-rehabilitation care--the resulting figure shall be used as the hospital's distinct-part-unit's payment-rate--A-hospital-distinct-part-unit's-per-diem-shall-be-the-leaser-of-the-hospital's calculated-per-diem-rate-or-the-mean-distinct-part-unit-rate-plus-three-standard-deviations--For-psychiatric care--the lower-of-the-resulting-figure-or-the-hospital's Medicaid-alternate-payment-rate-shall-be-used-as-the hospital's-distinct-part-unit's-payment-rate--In-the-case of-a-new-distinct-part-unit-for-which-the-Department-has insufficient-paid-claims-history-data-available--the Department-shall-utilize-the-average-payment-rate calculated-under-this-subsection-(b)-for-like-distinct-part units.

- B) The resulting quotient, as calculated in subsection (b)(1)(A) above, shall be multiplied by the hospital's total operating cost per diem, as calculated in Section 148.260(a)(1)(B).

NOTICE OF PROPOSED AMENDMENTS

Section 148.270(b)(1) (continued)

- C) The capital related cost per diem, as calculated in Section 148.260(a)(2), and the direct medical education cost per diem, as calculated in Section 148.260(a)(3), are then added to the resulting product calculated in subsection (b)(1)(B) above, subject to the inflation adjustment described in Section 148.260(c)(1).
- D) Subject to the provisions of subsection (b)(1)(F) and (b)(1)(F) below, the final distinct part unit payment rate shall be the lower of:
- The result of the calculations described in subsections (b)(1)(A) through (b)(1)(C) above; or
 - The hospital's alternate cost per diem rate, as calculated in subsection (a) above.
- E) In no case shall the hospital's final distinct part unit payment rate be greater than three standard deviations above the mean distinct part unit payment rate.
- F) In the case of a new distinct part unit for which the Department has insufficient adjudicated claims history data available, the Department shall utilize the average payment rate calculated under this subsection (b)(1) for like distinct part units.
- 2) For admissions occurring within a rate period described in Section 148.25(g)(2)(B), the distinct part unit payment rate shall be the distinct part unit payment rate in effect on June 30, 1993, as calculated under subsection (b)(1) above, updated to the midpoint of the current rate period, using the JFRA price inflation factor.
- c) In the case of a new hospital (not previously owned or operated), a hospital that has significantly changed its case-mix profile (e.g. a general acute care hospital changing its case-mix to reflect a predominance of long term care patients), or an out-of-state non cost-reporting hospital, reimbursement for inpatient services shall be as follows:
- For general acute-care hospitals, reimbursement for inpatient services shall be at the average payment rate calculated under subsection (a) or (b) above, as applicable, for those hospitals reimbursed under 89 Ill. Adm. Code 149.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.270(c) (continued)

- 2) For psychiatric hospitals, as defined in 89 Ill. Adm. Code 149.50(c)(1), reimbursement for inpatient psychiatric services shall be at the average rate calculated under Section 148.260 for those hospitals defined in 89 Ill. Adm. Code 149.50(c)(1).
- 3) For rehabilitation hospitals, as defined in 89 Ill. Adm. Code 149.50(c)(2), reimbursement for inpatient rehabilitation services shall be at the average rate calculated under Section 148.260 for those hospitals defined in 89 Ill. Adm. Code 149.50(c)(2).
- 4) For long term stay hospitals, as defined in 89 Ill. Adm. Code 149.50(c)(4), reimbursement for inpatient services shall be at the average rate calculated under Section 148.260 for those hospitals defined in 89 Ill. Adm. Code 149.50(c)(4).
- 5) For children's hospitals, as defined in 89 Ill. Adm. Code 149.50(c)(3), reimbursement for inpatient services shall be at the average rate calculated under subsection (a) above for those hospitals defined in 89 Ill. Adm. Code 149.50(c)(3).

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.280 Reimbursement Methodologies for Children's Hospitals and Hospitals Reimbursed Under Special Arrangements

a) Children's Hospitals

1) Initial Rate Period

- A) For purposes of reimbursement, all children's hospitals, as defined in 89 Ill. Adm. Code 149.50(c)(3), are grouped into one peer group.
- B) Each hospital's costs for the base period shall be derived from audited cost reports (see 42 CFR 447.260 and 447.265 (1982)) for hospital fiscal years ending during calendar year 1989.
- C) In the event that an audited cost report is not available at the time rates are calculated, the unaudited report for the applicable period shall be used for the calculation of interim rates. Upon completion of the audit, the rates shall be recalculated. Payments made under the interim rate shall be reconciled.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.280(a)(1) (continued)

C) These base period costs shall be updated, trended forward, from the midpoint of each hospital's base period to the midpoint of the rate period for which rates are being set according to the methodology of the national total hospital market basket price proxies, (DRI).

D) The children's hospitals' base period trended rates shall be used as the basis for calculating the group's median trended rate. Each individual hospital's trended rate is then compared to the group's median trended rate.

Hospitals whose individual trended rates are higher than the median rates shall receive as a final inpatient payment rate their trended rate minus half the difference between their trended rate and the group's median trended rate.

Hospitals whose trended rates are lower than the group's median trended rate shall receive as its final inpatient payment rate their individual trended rate plus half the difference between their trended rate and the group's median trended rate.

2) Subsequent Rate Periods

For the rate period beginning on October 1, 1992, as described in Section 148.25(g)(1)(A), and for subsequent rate periods, as described in Section 148.25(g)(1)(B), the initial rate, as calculated under subsection (a)(1) above, corrected according to the results of completed cost-report audits, shall be updated from the midpoint of the base cost reporting period to the midpoint of the rate period using the national hospital market basket price proxies (DRI).

b) Hospitals Reimbursed Under Special Arrangements

Hospitals that, on August 31, 1991, had a contract with the Department under the ICARE Program, pursuant to Section 3-4 of the Illinois Health Finance Reform Act, may elect to continue to be reimbursed at rates stated in such contracts for general and specialty care for services provided on or after September 1, 1991, subject to the limitations described in Sections 148.40(e) through 148.40(g).

(Source: Amended at 17 Ill. Reg. _____, effective _____)

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290 Adjustments and Reductions to Total Payments

a) Applicable Adjustments for DSH and Uncompensated Care

The criteria and methodology for making applicable DSH and uncompensated care adjustments to hospitals which are exempt from the DRG-PPS (see 89 Ill. Adm. Code 149) shall be in accordance with Section 148.120 or, if applicable, Section 148.150.

b) Outlier Adjustments

Outlier adjustments to payment amounts for medically necessary inpatient hospital services involving exceptionally high costs for certain individuals shall be made in accordance with Section 148.130 for hospitals that are exempt from the DRG PPS (see 89 Ill. Adm. Code 149).

c) Trauma Center Adjustments (TCA)

For inpatient admissions occurring on or after October 1, 1992, the Department shall make trauma center adjustments (TCA) to hospitals recognized, as of the first day of July preceding the TCA rate period, as Level I or Level II trauma centers by the Illinois Department of Public Health, or, if applicable, by the licensing agency in the State in which the hospital is located, in accordance with the provisions of subsections (c)(1) through (c)(5) below.

1) Level I Trauma Center Adjustment (TCA). Hospitals that, on the first day of July preceding the TCA rate period, meet the following criteria shall receive an adjustment of \$19,200.00 per Medicaid trauma admission in the TCA base period:

A) The hospital must not be a county-owned hospital, as described in Section 148.25(b)(1)(A), or a state-owned hospital, as described in Section 148.25(b)(1)(B). The hospital is reimbursed under Sections 148.250 through 148.300 of 89 Ill. Adm. Code 149; and

B) The hospital must be recognized as a Level I trauma center by the Illinois Department of Public Health, or by the licensing agency in the State in which the hospital is located if the hospital is located within 50 miles of an Illinois border.

2) Level II Rural Trauma Center Adjustment (TCA). Illinois rural hospitals that meet the following criteria shall receive an adjustment of \$9,400.00 per Medicaid trauma admission in the TCA

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(c)(2) (continued)

base period, on the first day of July preceding the rate period, are recognized as Level II trauma centers by the Illinois Department of Public Health shall receive an adjustment of \$9,400.00 per Medicaid trauma admission in the TCA base period.

A) With respect to the October 1, 1992, TCA rate period, on the first day of July preceding the TCA rate period, the hospital is located in a rural area and is recognized as a Level II trauma center by the Illinois Department of Public Health.

B) With respect to the October 1, 1993, TCA rate period, on July 14, 1993, the hospital is designated as a rural hospital, as defined in Section 148.25(g)(3), and is recognized as a Level II trauma center by the Illinois Department of Public Health.

C) With respect to TCA rate periods beginning on or after October 1, 1994, on the first day of July preceding the TCA rate period, the hospital is designated as a rural hospital, as defined in Section 148.25(g)(3), and is recognized as a Level II trauma center by the Illinois Department of Public Health.

3) Level II Urban Trauma Center Adjustment (TCA). Illinois urban hospitals, as described in Section 148.25(g)(4) for rate periods beginning on or after October 1, 1993, that, on the first day of July preceding the TCA rate period, are recognized as Level II trauma centers by the Illinois Department of Public Health shall receive an adjustment of \$9,400.00 per Medicaid trauma admission in the TCA base period, provided that such hospital meets the criteria described in subsections (c)(3)(B) or (c)(3)(C) below:

A) The Medicaid trauma admission percentage, as described in subsection (c)(7)(C) below, shall be calculated for each hospital described in subsection (c)(3) above. The trauma percentage shall be calculated by dividing each such hospital's Medicaid trauma admissions by the total Medicaid trauma admissions for such hospitals.

B) Each hospital described in subsection (c)(3) that meets the following additional criteria shall be eligible for the adjustment described in subsection (c)(3) above:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(c)(3)(B) (continued)

- i) The hospital is located in a county with no Level I trauma center;
 - ii) The hospital has a Medicaid trauma admission percentage at or above the mean of the individual facility values determined in subsection (c)(3)(A) above; and
 - iii) The hospital is located in a Health Manpower Shortage Area (HMSA) (42 CFR 5, 1989), as of the first day of July preceding the TCA rate period year.
- C) Each hospital described in subsection (c)(3) that meets the following additional criteria shall be eligible for the adjustment described in subsection (c)(3) above:
- i) The hospital is located in a county with no Level I trauma center; and
 - ii) The hospital has a Medicaid trauma admission percentage that is at least the mean plus one standard deviation of the individual facility values determined in subsection (c)(3)(A) above.
- 4) County Trauma Center Adjustment (TCA). Illinois hospitals that, on the first day of July preceding the TCA rate period, are recognized as Level I or Level II trauma centers by the Illinois Department of Public Health, shall receive an adjustment that shall be calculated as follows:
- A) The available funds from the Trauma Center Fund for each quarter shall be divided by each eligible hospital's (as defined in subsection (c)(4) above) Medicaid trauma admissions in the same quarter of the TCA base period to determine the adjustment for the TCA rate base period.
 - B) The county trauma center adjustment payments shall not be treated as payments for hospital services under Title XIX of the Social Security Act for purposes of the calculation of the intergovernmental transfer provided for in Section 15-3(a) of the Public Aid Code.
- 5) Each eligible hospital's trauma center adjustment for the TCA rate period shall equal the sum of the amounts described in subsections (c)(1), (c)(2), (c)(3), and (c)(4)(A). The trauma

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(c)(5) (continued)

- center adjustments shall be paid to eligible hospitals on a quarterly basis.
- 6) Trauma Center Adjustment Limitations. Hospitals that qualify for trauma center adjustments under this subsection shall not be eligible for the total trauma center adjustment if, during the TCA rate period, the hospital is no longer recognized by the Illinois Department of Public Health, or the appropriate licensing agency, as a Level I trauma center as required for the adjustment described in subsection (c)(1) above, a Level II trauma center as required for the adjustment described in subsection (c)(2) or (c)(3) above, or as a Level I or a Level II trauma center as required for the adjustment described in subsection (c)(4) above. In these instances, the adjustments calculated under this subsection shall be pro-rated, as applicable, based upon the date that such recognition ceased.
- 7) Trauma Center Adjustment Definitions. The definitions of terms used with reference to calculation of the trauma center adjustments required by subsection (c) are as follows:
- A) "Available funds" means that ~~97.5 percent of the funds available for distribution to the Department by the State Treasurer~~ which have been deposited into the Trauma Center Fund, which have been distributed to the Department by the State Treasurer, and which have been appropriated by the Illinois General Assembly.
 - B) "Medicaid trauma Fund admission" means those claims billed as admissions, excluding admissions for normal newborns, which were subsequently adjudicated paid by the Department through the last day of June preceding the TCA rate period and contained within the Department's paid claims data base, with an ICD-9-CM principal diagnosis code of: 800.0 through 800.99, 801.0 through 801.99, 802.0 through 802.99, 803.0 through 803.99, 804.0 through 804.99, 805.0 through 805.99, 806.0 through 806.99, 807.0 through 807.99, 808.0 through 808.9, 809.0 through 809.1, 828.0 through 828.1, 839.0 through 839.3, 839.7 through 839.9, 850.0 through 850.9, 851.0 through 851.99, 852.0 through 852.59, 853.0 through 853.19, 854.0 through 854.19, 860.0 through 860.5, 861.0 through 861.32, 862.8, 863.0 through 863.99, 864.0 through 864.19, 865.0 through 865.19, 866.0 through 866.13, 867.0 through 867.9, 868.0 through 868.19, 869.0 through 869.1, 887.0 through 887.7, 896.0 through

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(c)(7)(B) (continued)

896.3, 897.0 through 897.7, 900.0 through 900.9, 902.0 through 904.9, 925, 926.8, 929.0 through 929.99, 958.4, 958.5, 990 through 994.99. For those hospitals recognized as Level I trauma centers solely for pediatric trauma cases, Medicaid trauma admissions are only calculated for the claims billed as admissions, excluding admissions for normal newborns, which were subsequently adjudicated paid by the Department through the last day of June preceding the TCA rate period and contained within the Department's paid claims data base, with ICD-9-CM diagnoses within the above ranges for children under the age of 18.

C) "Medicaid trauma admission percentage" means a fraction, the numerator of which is the hospital's Medicaid trauma admissions in a given twelve month, and the denominator of which is the total Medicaid trauma admissions for all level II urban trauma centers.

D) "TCA base period" means State Fiscal Year 1991, for TCA payments calculated for the October 1, 1992 TCA rate period, State Fiscal Year 1992 for TCA payments calculated for the October 1, 1993, TCA rate period, etc.

E) "TCA rate period" means, beginning October 1, 1992, the 12 month period beginning on October 1 of the year and ending September 30 of the following year.

F) "Trauma admission" means these claims billed as admissions, which were subsequently paid by the Department and contained within the Department's paid claims data base, with an ICD-9-CM principal diagnosis code of 800.0 through 800.99, 801.0 through 801.99, 802.0 through 802.99, 803.0 through 803.99, 804.0 through 804.99, 805.0 through 805.98, 806.0 through 806.99, 807.0 through 807.69, 808.0 through 808.99, 809.0 through 809.19, 828.0 through 828.19, 839.0 through 839.2, 839.7 through 839.9, 850.0 through 850.9, 851.0 through 851.99, 852.0 through 852.59, 853.0 through 853.19, 854.0 through 854.19, 860.0 through 860.5, 861.0 through 861.22, 862.8, 863.0 through 863.99, 864.0 through 864.19, 865.0 through 865.19, 866.0 through 866.12, 867.0 through 867.9, 868.0 through 868.19, 869.0 through 869.19, 887.0 through 887.7, 896.0 through 896.3, 897.0 through 897.7, 900.0 through 900.9, 902.0 through 904.9, 925, 926.8, 929.0 through 929.99, 958.4, 958.5, 990 through 994.99, for these hospitals recognized as Level I trauma

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(c)(7)(D) (continued)

centers solely for pediatric trauma cases, trauma admissions are only calculated for the claims billed as admissions, which were subsequently paid by the Department with ICD-9-CM diagnoses within the above ranges for children under the age of 18.

F) "Trauma Center Fund" means the fund created for the purpose of distributing a portion of monies received by county circuit clerks for certain violations of laws or ordinances regulating the movement of traffic to Level I and Level II trauma centers located in the State of Illinois. The Trauma Center Fund shall also consist of all federal matching funds received by the Department as a result of expenditures made by the Department as required by this subsection (c).

d) Rehabilitation Hospital Adjustment (RHA)

Illinois hospitals that, on the first day of July preceding the RHA rate period, qualify as rehabilitation hospitals, as defined in 89 Ill. Adm. Code 149.50(c)(2) and are accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), shall receive a rehabilitation hospital adjustment in the RHA rate period as follows:

1) Eligible hospitals, as defined in 89 Ill. Adm. Code 149.50(c)(2), shall receive a rehabilitation hospital adjustment that consists of the following two components:

A) Treatment Component. All hospitals defined in 89 Ill. Adm. Code 149.50(c)(2), shall receive \$3,800.00 per Medicaid Level I admission in the RHA base period.

B) Facility Component. All hospitals defined in 89 Ill. Adm. Code 149.50(c)(2), shall receive a facility component that shall be based upon the number of Medicaid Level I admissions in the RHA base period as follows:

i) Hospitals with fewer than 100 Medicaid Level I admissions in the RHA base period shall receive a facility component of \$100,000.00 in the RHA rate period.

ii) Hospitals with 100 or more Medicaid Level I admissions in the RHA base period shall receive a facility component of \$400,000.00 in the RHA rate period.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(d) (continued)

2) Each eligible hospital's rehabilitation hospital adjustment for the RHA rate period shall equal the sum of the amounts described in subsections (d)(1)(A) and (d)(1)(B) above. The rehabilitation hospital adjustments shall be paid to eligible hospitals on a quarterly basis.

3) Rehabilitation Hospital Adjustment Definitions. The definitions of terms used with reference to calculation of the rehabilitation hospital adjustments required by subsection (d) are as follows:

A) "Medicaid Level I admissions" means those claims billed as Level I admissions, excluding admissions for normal newborns, which were subsequently adjudicated paid by the Department through the last day of June preceding the RHA rate period and contained within the Department's paid claims data base, with an occurrence code of 63 when applicable and an ICD-9-CM principal diagnosis code of: 054.3, 310.1 through 310.2, 320.1, 336.0 through 336.9, 344.0 through 344.2, 344.8 through 344.9, 348.1, 801.30, 803.10, 803.84, 806.0 through 806.19, 806.20 through 806.24, 806.26, 806.29 through 806.34, 806.36, 806.4 through 806.5, 851.06, 851.80, 853.05, 854.0 through 854.04, 854.06, 854.1 through 854.14, 854.16, 854.19, 905.0, 907.0, 907.2, 952.0 through 952.09, 952.10 through 952.16, 952.2, and V57.0 through V57.89.

B) "RHA base period" means State Fiscal Year 1991, for RHA payments calculated for the October 1, 1992 RHA rate period, State Fiscal Year 1992 for RHA payments calculated for the October 1, 1993, RHA rate period, etc.

C) "RHA rate period" means, beginning October 1, 1992, the 12 month period beginning on October 1 of the year and ending September 30 of the following year.

e) Perinatal Center Adjustments (PCA)

For inpatient admissions occurring on or after October 1, 1993, the Department shall make perinatal center adjustments (PCA) to hospitals in accordance with the provisions of subsections (e)(1) through (e)(3) below.

1) Hospitals that meet the following criteria shall receive an adjustment of \$825.00 per Medicaid perinatal admission in the PCA rate period:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(e)(1)(A) (continued)

A) The hospital is designated as a Level II perinatal center by the Illinois Department of Public Health, or, if applicable, by the licensing agency in the State in which the hospital is located, on the first day of July preceding the PCA rate period;

B) The hospital is:

i) With respect to the October 1, 1992, PCA rate period, located in a rural area on the first day of July preceding the PCA rate period;

ii) With respect to the October 1, 1993, PCA rate period, designated as a rural hospital, as defined in Section 148.25(g)(3), on July 14, 1993;

iii) With respect to PCA rate periods beginning on or after October 1, 1994, designated as a rural hospital, as defined in Section 148.25(g)(3), on the first day of July preceding the PCA rate period; and

C) The hospital has a Medicaid perinatal percentage of 30 percent or above.

2) The perinatal center adjustments calculated under subsection (e)(1) above shall be paid to eligible hospitals on a quarterly basis.

3) Perinatal Center Adjustment Limitations. Hospitals that qualify for PCA adjustments under subsection (e)(1) above shall not be eligible for the total PCA adjustment if, during the PCA rate period the hospital is no longer recognized or designated by the Illinois Department of Public Health, or the appropriate licensing agency, as a Level II perinatal center, as required by subsection (e)(1)(A) above. In this instance, the annual adjustment described in subsection (e)(1) above shall be pro-rated, as applicable, based upon the date that the designation ceased.

4) Perinatal Center Adjustment (PCA) Definitions. The definitions of terms used with reference to calculation of the perinatal center adjustments required by this subsection (e) are as follows:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(e)(4) (continued)

A) "Medicaid perinatal admissions", as referred to in subsection (e)(4)(D) below, means those claims billed as admissions, excluding admissions for normal newborns, which were subsequently adjudicated by the Department through the last day of June preceding the PCA rate period and contained within the Department's paid claims data base, for infants less than 29 days of age at the time of the admission with an ICD-9-CM diagnosis code within the ranges of 760 through 779 and V30 through V39, and those claims billed as admissions, excluding admissions for normal newborns, which were subsequently adjudicated by the Department through the last day of June preceding the PCA rate period and contained within the Department's paid claims data base, related to pregnancy, childbirth and the puerperium with an ICD-9-CM principal diagnosis code within the range of 630 through 676.

B) "Medicaid perinatal percentage" means a fraction, the numerator of which is the hospital's Medicaid perinatal admissions, and the denominator of which is the hospital's total Medicaid admissions.

C) "PCA base period" means State Fiscal Year 1992, for PCA payments calculated for the October 1, 1993, PCA rate period, State Fiscal Year 1993 for PCA payments calculated for the October 1, 1994, PCA rate period, etc.

D) "PCA rate period" means, beginning October 1, 1993, the 12 month period beginning on October 1 of the year and ending September 30 of the following year.

E) "Total Medicaid admissions", as referred to in subsection (e)(4)(B) above, means the total claims billed as admissions, excluding admissions for normal newborns, which were subsequently adjudicated by the Department through the last day of June preceding the PCA rate period and contained within the Department's paid claims data base.

f) Obstetrical Care Adjustments (OCA)

For inpatient admissions occurring on or after October 1, 1993, the Department shall make obstetrical care adjustments (OCA) to hospitals in accordance with the provisions of subsection (f)(1) below.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(f) (continued)

1) Hospitals that meet the following criteria shall receive an adjustment of \$675.00 per Medicaid obstetrical admission in the OCA rate period:

A) The hospital offers nonemergency obstetric procedures to the general public on the first day of July preceding the OCA rate period.

B) The hospital is:

i) With respect to the October 1, 1992, OCA rate period, located in a rural area on the first day of July preceding the OCA rate period;

ii) With respect to the October 1, 1993, OCA rate period, designated as a rural hospital, as defined in Section 148.25(g)(3), on July 14, 1993;

iii) With respect to OCA rate periods beginning on or after October 1, 1994, designated as a rural hospital, as defined in Section 148.25(g)(3), on the first day of July preceding the OCA rate period; and

C) The hospital has a Medicaid obstetrical percentage of 20 percent or above.

2) The obstetrical care adjustments calculated under subsection (f)(1) above shall be paid to eligible hospitals on a quarterly basis.

3) Obstetrical Care Adjustment Limitations. Hospitals that qualify for OCA adjustments under subsection (f)(1) above shall not be eligible for the total OCA adjustment if, during the OCA rate period the hospital discontinues the provision of non-emergency obstetrical care. In this instance, the annual adjustment described in subsection (f)(1) shall be pro-rated, as applicable, based upon the date that the hospital discontinued the provision of such non-emergency obstetrical care.

4) Obstetrical Care Adjustment (OCA) Definitions. The definitions of terms used with reference to calculation of the obstetrical care adjustments required by subsection (f) are as follows:

A) "Medicaid obstetrical admissions", as referred to in subsection (f)(4)(B) below, means those claims billed as admissions, which were subsequently adjudicated by the

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(f)(4)(A) (continued)

Department through the last day of June preceding the OCA rate period and contained within the Department's paid claims data base, with an ICD-9-CM diagnosis code within the ranges of 650 and 669 which resulted in childbirth.

B) "Medicaid obstetrical percentage" means a fraction, the numerator of which is the hospital's Medicaid obstetrical admissions, and the denominator of which is the hospital's total Medicaid admissions.

C) "OCA base period" means State Fiscal Year 1992, for OCA payments calculated for the October 1, 1993, OCA rate period, State Fiscal Year 1993 for OCA payments calculated for the October 1, 1994, OCA rate period, etc.

D) "OCA rate period" means, beginning October 1, 1993, the 12 month period beginning on October 1 of the year and ending September 30 of the following year.

E) "Total Medicaid admissions", as referred to in subsection (f)(4)(B) above, means the total claims billed as admissions, excluding admissions for normal newborns, which were subsequently adjudicated by the Department through the last day of June preceding the OCA rate period and contained within the Department's paid claims data base.

g) Targeted Access Payment (TAP) Adjustments

For inpatient admissions occurring on or after October 1, 1993, the Department shall make targeted access payment (TAP) adjustments to Illinois hospitals in accordance with the provisions of subsections (g)(1) through (g)(8) below.

1) Criteria. To qualify for TAP adjustments under this subsection (g), hospitals must meet the following criteria:

A) With respect to the TAP adjustments described in subsections (g)(2) through (g)(6), the hospitals must be eligible to receive the adjustment payments described in Section 148.120(g)(2) in the TAP rate period:

B) With respect to the TAP adjustments described in subsections (g)(2) through (g)(6), the hospital must not be a county-owned hospital, as described in Section 148.25(b)(1)(A), or a state-owned hospital, as described in Section 148.25(b)(1)(B):

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(g)(1) (continued)

C) With respect to the TAP adjustments described in subsections (g)(2), (g)(3) and (g)(5), and subject to subsection (g)(1)(E) below, the hospital must have 500 or fewer certificate of need beds if located in an urban area, as described in Section 148.25(g)(4). The number of certificate of need beds shall include total beds, excluding any used for substance abuse, long term care or swing beds, and shall be determined by the Illinois Department of Public Health (IDPH), based upon the most current IDPH published report entitled "Bed Count, Average Length of Stay, Average Daily Census and Percent Occupancy for Non-Federal Hospitals in Illinois", which is available to the Illinois Department of Public Aid in the month immediately preceding the TAP rate period; and

D) With respect to the TAP adjustments described in subsections (g)(2), (g)(3) and (g)(5), and subject to subsection (g)(1)(E) below, the hospital must have 300 or fewer certificate of need beds if located in a rural area, as described in Section 148.25(g)(3). The number of certificate of need beds shall include total beds, excluding any used for substance abuse, long term care or swing beds, and shall be determined by the Illinois Department of Public Health (IDPH), based upon the most current IDPH published report entitled "Bed Count, Average Length of Stay, Average Daily Census and Percent Occupancy for Non-Federal Hospitals in Illinois", which is available to the Illinois Department of Public Aid in the month immediately preceding the TAP rate period.

E) Notwithstanding the provisions of subsections (g)(1)(C) and (g)(1)(D), a children's hospital, as described in 148.120(a)(5), shall be eligible for the adjustments described in subsections (g)(2) and (g)(4). A children's hospital shall not be subject to or eligible for the adjustments described in subsections (g)(3), (g)(5) or (g)(6).

2) Medicaid Percentage Adjustment. Eligible hospitals, as described in subsection (g)(1) above, with a Medicaid inpatient utilization rate, as defined in Section 148.120(1)(5), of 35% or above shall receive an adjustment of \$70.00 per Medicaid admission in the TAP base year and all other eligible hospitals shall receive an adjustment per Medicaid admission in the TAP base year which is calculated by dividing the individual

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(g)(2) (continued)

hospital's Medicaid inpatient utilization rate by 35% and multiplying the result by \$70.00.

- 3) Obstetrical Care Adjustment. Eligible hospitals, as described in subsection (a)(1) above, that provide nonemergency obstetrical services to the general public shall receive a TAP obstetrical care adjustment which shall include:

- A) An adjustment of \$680.00 per Medicaid obstetrical admission in the TAP base period; and
- B) An additional adjustment, up to \$340.00 per Medicaid obstetrical admission in the TAP base period, based upon the hospital's Medicaid obstetrical admission percentage. The additional adjustment shall be calculated by giving the hospital providing the most Medicaid obstetrical admissions a \$340.00 adjustment per Medicaid obstetrical admission in the TAP base period and all other qualifying hospitals an adjustment equal to the individual hospital's Medicaid obstetrical admission percentage divided by the Medicaid obstetrical admission percentage of the hospital with the highest Medicaid obstetrical admission percentage, the result of which shall then be multiplied by \$340.00.

- 4) Children's Care Adjustment. Eligible hospitals, as described in subsections (g)(1)(A) through (g)(1)(B) above, that provide services to children (defined as under the age of 18 and which excludes obstetrical services) shall receive a TAP children's care adjustment.

- A) Eligible hospitals, as described in subsections (g)(1)(A), (g)(1)(B), and (g)(1)(E) above, shall receive a TAP children's care adjustment of up to \$600.00 per Medicaid children's admission in the TAP base period. The adjustment shall be calculated by dividing each eligible hospital's Medicaid children's admissions in the TAP base period by each eligible hospital's total Medicaid admissions in the TAP base period to arrive at the Medicaid children's admission percentage.

- B) The hospital with the highest percentage of Medicaid children's admissions shall receive an adjustment of \$600.00 for each Medicaid children's admission in the TAP base period and all other qualifying hospitals shall receive an adjustment equal to \$600.00 multiplied by the individual hospital's Medicaid children's admission

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(g)(4)(B) (continued)

percentage divided by the Medicaid children's admission percentage of the hospital with the highest Medicaid children's admission percentage.

- 5) Ambulatory Care Network Adjustment. Eligible hospitals, as described in subsection (g)(1) above, shall complete and submit the Ambulatory Care Network Questionnaire in order to be considered for the TAP ambulatory care network adjustment. The Ambulatory Care Network Questionnaire must be received within 30 calendar days after receipt of notification from the Department that the information must be submitted. Information required in this subsection (g) which is not received in compliance with this requirement shall not be considered for the determination of those hospitals qualified for ambulatory care network adjustments. In addition, such hospitals shall be required to enter into an agreement with the Department which describes in detail their involvements in ambulatory care, and includes commitments to maintain operations. Hospitals shall be required to notify the Department in advance of any action which would result in a reduction of 20 percent or more in the number of visits provided by hospital-operated primary care clinics or a reduction of 20 percent or more in the number of visits provided by primary care physicians. The TAP ambulatory care network adjustment shall consist of three possible individual adjustments as follows:

- A) Hospitals reporting the following number of physician office visits on the Ambulatory Care Network Questionnaire shall receive the following adjustments per total Medicaid admissions in the TAP base period:

Urban Threshold	Rural Threshold	Adjustment
0 - 9,999	0 - 4,999	\$ 00.00
10,000 - 40,000	5,000 - 10,000	\$125.00
40,001 - 100,000	10,001 - 50,000	\$145.00
100,001 and over	50,001 and over	\$165.00

- B) Hospitals qualifying for an adjustment under subsection (g)(5)(A) above shall receive an additional \$135.00 per total Medicaid admissions in the TAP base period if they have a formal linkage agreement with City of Chicago Partnerships in Health or Medicaid Partnerships.

Section 148.290(g)(5) (continued)

- C) Hospitals qualifying for an adjustment under subsection (g)(5)(B) above shall receive an additional \$135.00 per total Medicaid admissions in the TAP base period if they have a formal linkage agreement with a Federally Qualified Health Center, a County Health Clinic, or a Rural Health Clinic.
- 6) TAP Index Adjustment. With the exception of adjustments calculated in subsections (g)(2) and (g)(4) for children's hospitals, as described in Section 148.120(a)(5), the sum of the adjustments calculated in subsections (g)(2) through (g)(5) shall be multiplied by the following applicable percentages, which are based upon each hospital's Medicaid inpatient utilization rate as defined in Section 148.120(1)(5):
- A) For those hospitals with a Medicaid inpatient utilization rate of 45 percent or above, the applicable percentage is 110 percent.
- B) For those hospitals with a Medicaid inpatient utilization rate of at least 25 percent, but less than 45 percent, the applicable percentage is 50 percent.
- C) For those hospitals with a Medicaid inpatient utilization rate of less than 25 percent, the applicable percentage is 25 percent.
- 7) The TAP adjustments calculated under subsections (g)(2) through (g)(6) above shall be paid to eligible hospitals on a quarterly basis.
- 8) Targeted Access Payment Adjustment Limitations.
- Hospitals that qualify for TAP adjustments under subsection (g)(3) above shall not be eligible for the total TAP adjustment if, during the TAP rate period:
- A) The hospital discontinues the provision of non-emergency obstetrical care. In this instance, the annual adjustment described in subsections (g)(3) and (g)(6) shall be pro-rated, as applicable, based upon the date that the hospital discontinued the provision of such non-emergency obstetrical care.
- B) The hospital does not honor its commitment to maintain operations as required in subsection (g)(5) of this

Section 148.290(g)(8)(B) (continued)

- Section. In the event that there is a reduction of 20 percent or more in the number of visits provided by hospital-operated primary care clinics or a reduction of 20 percent or more in the number of visits provided by primary care physicians, the Department may, subject to approval by the Director, deem the hospital ineligible for the adjustments described in subsections (g)(5) and (g)(6) of this Section, either in total or in part.
- C) The hospital discontinues its formal linkage agreements required in subsections (g)(5)(B) and (g)(5)(C). In this instance, the annual adjustment described in subsections (g)(5) and (g)(6) shall be pro-rated based upon the date that the formal linkage agreement(s) was discontinued.
- 9) Targeted Access Payment (TAP) Adjustment Definitions. The definitions of terms used with reference to calculation of the targeted access payment adjustments required by subsection (g) are as follows:
- A) "Medicaid children's admission" means those claims billed as admissions of an individual under the 18 years of age, excluding admissions for normal newborns, which were subsequently adjudicated by the Department through the last day of June preceding the TAP rate period and contained within the Department's paid claims data base, but excludes those claims billed as admissions with an ICD-9-CM principal diagnosis code within the range of 650 and 669 (indicating an obstetrical admission).
- B) "Medicaid obstetrical admission" means those claims billed as admissions, which were subsequently adjudicated by the Department through the last day of June preceding the TAP rate period and contained within the Department's paid claims data base, with an ICD-9-CM principal diagnosis code within the ranges of 650 and 669 which resulted in childbirth.
- C) "Medicaid obstetrical admission percentage" means a fraction, the numerator of which is the hospital's Medicaid obstetrical admissions, and the denominator of which is the Medicaid obstetrical admissions provided by all hospitals qualified for the TAP obstetrical care adjustment.
- D) "Medicaid perinatal percentage" means a fraction, the numerator of which is the hospital's Medicaid perinatal

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(g)(9)(D) (continued)

admissions, and the denominator of which is the hospital's total Medicaid admissions.

- E) "TAP base period" means State Fiscal Year 1992, for TAP payments calculated for the October 1, 1993, TAP rate period, State Fiscal Year 1993 for TAP payments calculated for the October 1, 1994, TAP rate period, etc.
- F) "TAP rate period" means, beginning October 1, 1993, the 12 month period beginning on October 1 of the year and ending September 30 of the following year.
- G) "Total Medicaid admissions", as referred to in subsection (g)(9)(D) above, means the total claims billed as admissions, excluding admissions for normal newborns, which were subsequently adjudicated by the Department through the last day of June preceding the TAP rate period and contained within the Department's paid claims data base.
- H) Medicaid High Volume Adjustments (MHVA)
- For inpatient admissions occurring on or after October 1, 1993, the Department shall make Medicaid High Volume Adjustments (MHVA) to hospitals in accordance with the provisions of subsection (h)(1) through (h)(2) below.

- 1) Criteria. To qualify for MHVA adjustments under this subsection (h), hospitals must meet the following criteria:

- A) With respect to the MHVA described in subsection (h)(2)(A) through (h)(2)(C), the hospitals must:

- i) Be eligible to receive the adjustment payments described in Section 148.120 (g)(2) in the MHVA rate period; and
- ii) Not be a county-owned hospital, as described in Section 148.25 (b)(1)(A), or a state-owned hospital, as described in Section 148.25 (b)(1)(B) in the MHVA rate period.

- B) With respect to the MHVA adjustments described in subsection (h)(2)(D):

- i) The hospital must not be eligible to receive the adjustment payments described in Section 148.120

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(h)(1)(B)(i) (continued)

(g)(2) in the MHVA rate period:

- ii) The total number of Medicaid inpatient days as defined in subsection (h)(4)(D) of this Section, provided by each Medicaid-participating Illinois hospital, must be at least one standard deviation above the mean number of Medicaid inpatient days, as defined in subsection (h)(4)(A) of this Section for the MHVA base fiscal year; and
- iii) The hospital must meet the requirements of subsection (h)(1)(D) below when located in a geographic area covered by the managed care component of the Healthy Moms/Healthy Kids Program, as described in 89 Ill. Adm. Code 140.928(a)(1).
- C) Source of Data. In making the determination described in subsection (h)(1)(B)(ii) above, the Department shall utilize:
- i) The hospital's final audited cost report for the hospital's MHVA base fiscal year. Medicaid inpatient days, as defined in subsection (h)(4)(D) of this Section, which have been derived from final audited cost reports, are not subject to the Review Procedure described in Section 148.310, with the exception of errors in calculation.
- ii) In the absence of a final audited cost report for the hospital's MHVA base fiscal year, the Department shall utilize the hospital's unaudited cost report for the hospital's MHVA base fiscal year. Due to the unaudited nature of this information, hospitals shall have the opportunity to submit a corrected cost report for the determination described in subsection (h)(1)(B)(ii) above. Submittal of a corrected cost report in support of subsection (h)(1)(B)(ii) above must be received no later than the first day of July preceding the MHVA rate period for which the hospital is requesting consideration of such corrected cost report for the determination of MHVA qualification. Corrected cost reports which are not received in compliance with these time limitations will not be considered for the determination of the hospital's Medicaid inpatient days as described in subsection (h)(4)(D) of this Section.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(h)(1)(C) (continued)

iii) Hospitals' Medicaid inpatient days, as defined in subsection (h)(4)(D) of this Section, which have been derived from unaudited cost reports, are not subject to the Review Procedure described in Section 148.310, with the exception of errors in calculation. Pursuant to subsection (h)(1)(C)(ii) above, hospitals shall have the opportunity to submit corrected cost report information prior to the Department's MHVA determination.

iv) In the event a subsequent final audited cost report reflects Medicaid inpatient days, as described in subsection (h)(4)(D) of this Section, which are lower than the Medicaid inpatient days derived from the unaudited cost report utilized for the MHVA determination, the Department shall recalculate the Medicaid inpatient days based upon the final audited cost report, and recoup any overpayments made.

D)

Hospitals meeting the criteria described in subsection (h)(1)(B) above, that are located in a geographic area covered by the managed care component of the Healthy Moms/Healthy Kids Program, as described in 89 Ill. Adm. Code 140.928(a)(1), must meet the following requirements:

i) Hospitals designated as Level III perinatal centers by the Illinois Department of Public Health must enter into an agreement with the Department to participate in the Healthy Moms/Healthy Kids Program as a Certified Obstetrical Ambulatory Care Center (COBACC), as described in 89 Ill. Adm. Code 140.461(f)(1)(C), with a minimum Healthy Moms/Healthy Kids client assignment capacity commitment of 1,500 Medicaid pregnant women;

ii) Hospitals that are not designated as Level III perinatal centers by the Illinois Department of Public Health must enter into an agreement or agreements with the Department to participate in the Healthy Moms/Healthy Kids Program as a Certified Hospital Ambulatory Primary Care Center (CHAPCC), as described in 89 Ill. Adm. Code 140.461(f)(1)(A), and/or a Certified Hospital Organized Satellite Clinic (CHOSC), as described in 89 Ill. Adm. Code 140.461(f)(1)(B), with a minimum total Healthy Moms/Healthy Kids client assignment capacity commitment of 4,500 Medicaid

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(h)(1)(D)(ii) (continued)

children and pregnant women; and

iii) Hospitals must enter into the agreements described in subsections (h)(1)(D)(i) and (h)(1)(D)(ii) above by the first day of January in the MHVA rate period.

2) Calculation of Medicaid High Volume Adjustments

- A) Hospitals meeting the criteria specified in subsection (h)(1)(A) above shall receive a MHVA payment adjustment of \$60.
- B) For children's hospitals, as defined in Section 148.120 (a)(5), the payment adjustment calculated under subsection (h)(2)(A) above shall be multiplied by 2.0.
- C) The amount calculated pursuant to subsections (h)(2)(A) and (h)(2)(B) above shall be adjusted on October 1, 1993, and annually thereafter, by a percentage equal to the lesser of:
- i) The increase in the national hospital market basket price proxies (DRI) hospital cost index for the most recent twelve month period for which data are available; or
 - ii) The percentage increase in the statewide average hospital payment rate, as described in subsection (h)(4)(E) of this Section, over the previous year's statewide average hospital payment rate.
- D) Hospitals meeting the criteria specified in subsections (h)(1)(B) and (h)(1)(D) above shall receive an add-on payment to their inpatient rate.

i) The distribution method for the add-on payment described in subsection (h)(2)(D) above is based upon a fund of \$12 million. All hospitals qualifying under subsections (h)(1)(B) and (h)(1)(D) above will receive a \$60 per day add-on to their current rate. The total cost of this adjustment is calculated by multiplying each hospital's most recent completed fiscal year Medicaid inpatient utilization data (adjusted based upon historical utilization and projected increases in utilization) by \$60. The total dollar amount of this calculation is then subtracted from the \$12 million fund.

Section 148.290(h)(2)(D) (continued)

ii) The remaining fund balance is then distributed to the hospitals that qualify under subsections (h)(1)(B) and (h)(1)(D) above in proportion to the percentage by which the hospital's Medicaid inpatient days, as described in subsection (h)(4)(D), exceeds one standard deviation above the State's mean Medicaid inpatient days, as described in subsection (h)(4)(A) of this Section. This is done by finding the ratio of each hospital's percent Medicaid inpatient days to the State's mean plus one standard deviation percent Medicaid inpatient days value. These ratios are then summed and each hospital's proportion of the total is calculated. These proportional values are then multiplied by each hospital's most recent completed fiscal year Medicaid inpatient utilization data (adjusted based upon historical utilization and projected increases in utilization). These weighted values are summed and each hospital's proportion of the summed weighted value is calculated. Each hospital's proportional value is then multiplied against the \$12 million pool of money available after the \$60 per day base add-on has been subtracted.

iii) The total dollar amount calculated for each qualifying hospital under subsection (h)(2)(D)(ii) above (plus the initial \$60 per day add-on amount calculated for each qualifying hospital under subsection (h)(2)(D)(i) above) is then divided by the Medicaid inpatient utilization data (adjusted based upon historical utilization and projected increases in utilization) to arrive at a per day add-on value. The adjustments calculated under this subsection are subject to the limitations described in subsection (h)(3) below.

E) The adjustments calculated under subsections (h)(2)(A) through (h)(2)(D) of this section shall be paid on a per diem basis and shall be applied to each covered day of care provided.

3) Medicaid High Volume Adjustment Limitations.

A) Hospitals located in a geographic area covered by the managed care component of the Healthy Moms/Healthy Kids Program, as described in 89 Ill. Adm. Code 140.928(a)(1), that qualify for MHVA adjustments under subsection

Section 148.290(h)(3)(A) (continued)

(h)(2)(D) above shall not be eligible for the MHVA adjustment if:

i) The hospital does not enter into a Healthy Moms/Healthy Kids agreement, as required in subsections (h)(1)(D)(i) and (h)(1)(D)(ii) above, by the first day of January of the MHVA rate period. In this instance, any adjustments described in subsection (h)(2)(D) that have been made by the Department shall be recouped and the hospital shall no longer be deemed eligible for the MHVA adjustment.

ii) The hospital does not honor its minimum Healthy Moms/Healthy Kids client assignment capacity commitment, as described in subsections (h)(1)(D)(i) and (h)(1)(D)(ii) of this Section. In this instance, the Department may, subject to approval by the Director, deem the hospital ineligible for the adjustments described in subsection (h)(2)(D) of this Section, either in total or in part.

B) Hospitals that qualify for MHVA adjustments under subsections (h)(2)(A) through (h)(2)(C) above shall not be eligible for such MHVA adjustments if they are no longer recognized or designated by the Department as a DSH hospital, as required by subsection (h)(1)(A)(i). In this instance, the annual adjustment described in subsection (h)(2) shall be pro-rated, as applicable, based upon the date that the hospital was deemed ineligible for DSH payments adjustments, under Section 148.120, by the Department.

4) Medicaid High Volume Adjustment Definitions. The definitions of terms used with reference to calculation of the MHVA adjustments required by subsection (h) are as follows:

A) "Mean Medicaid inpatient days" means a fraction the numerator of which is the total number of inpatient days provided in a given 12 month period by all Medicaid participating Illinois hospitals to patients who, for such days, were eligible for Medicaid under Title XIX under the Federal Social Security Act (42 U.S.C. Sec. 1396a et seq.) and the denominator of which is the total number of all Medicaid participating Illinois hospitals. Title XIX specifically excludes days of care provided to family and

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(h)(4)(A) (continued)

Children Assistance (formerly known as General Assistance) and Aid to the Medically Indigent (AMI) days but does include the types of days described in Section 148.120(c)(3). In this paragraph, the term "inpatient day" includes each day in which an individual (including a newborn) is an inpatient in the hospital whether or not the individual is in a specialized ward and whether or not the individual remains in the hospital for lack of suitable placement elsewhere.

B) "MHVA base fiscal year" means, for example, the hospital's fiscal year ending in 1991 for the October 1, 1993, MHVA determination year, the hospital's fiscal year ending in 1992 for the October 1, 1994, MHVA determination year, etc.

C) "MHVA rate period" means, beginning October 1, 1993, the 12 month period beginning on October 1 of the year and ending September 30 of the following year.

D) "Medicaid inpatient days" means the total number of inpatient days provided in a given 12 month period by each hospital to patients who, for such days, were eligible for Medicaid under Title XIX under the Federal Social Security Act (42 U.S.C. Sec. 1396a et seq.). Title XIX specifically excludes days of care provided to Family and Children Assistance (formerly known as General Assistance) and Aid to the Medically Indigent (AMI) days but does include the types of days described in Section 148.120(c)(3). In this subsection (h)(4)(D), the term "inpatient day" includes each day in which an individual (including a newborn) is an inpatient in the hospital whether or not the individual is in a specialized ward and whether or not the individual remains in the hospital for lack of suitable placement elsewhere.

E) "Statewide Average Hospital Payment Rate" means the hospital's alternative reimbursement rate, as defined in Section 148.270(a).

(2) Inpatient Payment Adjustments based upon DSH Determination Reviews. Appeals based upon a hospital's ineligibility for the inpatient DSH payment adjustments described in this Section, or their payment adjustment amounts, in accordance with Section 148.310, which result in a change in a hospital's eligibility for inpatient DSH payment adjustments or a change in a hospital's payment adjustment amounts,

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.290(i) (continued)

shall not affect the inpatient payment adjustments DSH status of any other hospital or the payment adjustment amount of any other hospital that has received notification from the Department of their eligibility for inpatient DSH payment adjustments based upon the requirements of this Section.

(b) Reductions to Total Payments

1) Copayments. Copayments are assessed under all medical programs administered by the Department except the Children and Family Assistance Program, formerly known as the General Assistance medical program, and shall be assessed in accordance with Section 148.190.

2) Third Party Payments. Hospitals shall determine that services are not covered, in whole or in part, under any program or under any other private group indemnification or insurance program, health maintenance organization, workers compensation or the tort liability of any third party. To the extent that such coverage is available, the Department's payment obligation shall be reduced.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 148.310 Review Procedure

a) Inpatient Rate Reviews

1) Hospitals shall be notified of their inpatient rate for the rate year and shall have an opportunity to request a review of the rate for errors in calculation. Such a request must be received in writing by the Department within 30 days of after the date of the Department's notice to the hospital of their rates. The Department shall notify the hospital of the results of the review within 30 days of after receipt of the hospital's request for review.

2) Hospitals reimbursed in accordance with Sections 148.250 through 148.300 and 89 Ill. Adm. Code 149 with respect to per diem add-ons for capital, medical education and CRNA costs, may request that an adjustment be made to their base year costs to reflect significant changes in costs which have been mandated in order to meet State, federal or local health and safety standards, and which have occurred since the hospital's filing

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.310(a)(2) (continued)

of the base year cost report. The allowable Medicare/Medicaid costs must be identified from the most recent audited cost report available. These costs must be significant, i.e., on a per unit basis, they must constitute one percent or more of the total allowable Medicaid/Medicare unit costs for the same time period. Appeals for base year cost adjustments must be received, in writing, by the Department within 30 days ~~of~~ after the date of the Department's notice to the hospital of their rates. Such request shall include a clear explanation of the cost change and documentation of the desired correction. The Department shall notify the hospital of the results of the review within 30 days ~~of~~ after receipt of the hospital's request for review.

- 3) Primary Care Access Health Care Education Payment Reviews. Hospitals reimbursed in accordance with 89 Ill. Adm. Code 149.140 with respect to per discharge add-ons for primary care access health care education payments, shall:

A) Be notified of their per discharge add-on amount for the rate period and shall have an opportunity to request a review of the per discharge add-on amount for errors in calculation. Such a request must be received in writing by the Department within 30 days after the date of the Department's notice to the hospital of their per discharge add-on amount. Such request shall include a clear explanation of the reason for the appeal and documentation of the desired correction. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

B) Be notified of any adjustments that shall be made to their per discharge add-on amount for the rate period as a result of the requirements of 89 Ill. Adm. Code 149.140, and shall have an opportunity to request a review of such adjustment determinations for errors in calculation. Such a request must be received in writing by the Department within 30 days of the date of the Department's notice to the hospital of adjustment amounts. Such a request shall include a clear explanation of reason for the appeal and documentation of the desired correction. The Department shall notify the hospital of the results of the review within 30 days of receipt of the hospital's request for review.

- b) DSH Determination Reviews

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.310(b) (continued)

1) Hospitals shall be notified of their qualification for DSH payment adjustments and shall have an opportunity to request a review of the DSH add-on for errors in calculation. Such a request must be received in writing by the Department within 30 days ~~of~~ after the date of the Department's notice to the hospital of its disproportionate share qualification and add-on calculations. Such request shall include a clear explanation of the error and documentation of the desired correction. The Department shall notify the hospital of the results of the review within 30 days ~~of~~ after receipt of the hospital's request for review.

- 2) DSH determination reviews shall be limited to the following:

A) DSH Determination Criteria. The criteria for DSH determination shall be in accordance with Section 148.120. Review shall be limited to verification that the Department utilized criteria in accordance with State regulations.

B) Medicaid Inpatient Utilization Rates. Medicaid inpatient utilization rates shall be calculated pursuant to Section 1923 of the Social Security Act and as defined in Section 148.120(a)(4)(1)(5). Review shall be limited to verification that Medicaid inpatient utilization rates were calculated in accordance with federal and State regulations.

C) Low Income Utilization Rates. Low Income utilization rates shall be calculated in accordance with Section 1923 of the Social Security Act and Section 148.120(a)(2) and (d). Review shall be limited to verification that low income utilization rates were calculated in accordance with federal and State regulations.

D) Federally Designated Health Manpower Shortage Areas (HMSAs). Illinois hospitals located in federally designated HMSAs shall be identified in accordance with 42 CFR 5, 1989, and Section 148.120(a)(3) based upon the methodologies utilized by, and the most current information available to the Department, from the Department of Health and Human Services as of July 1, 1991 through September 30, 1992. --For the period July 1, 1992, through September 30, 1992, Illinois hospitals located in federally designated HMSAs shall be identified in accordance with 42 CFR 5, 1989, and Section 148.120(a)(3) based upon the methodologies utilized by, and the most current information

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.310(b)(2)(D) (continued)

available to the Department of Health and Human Services as of June 30, 1992. Review shall be limited to hospitals in locations that have failed to obtain designation as federally designated HMSAs only when such a request for review is accompanied by documentation from the Department of Health and Human Services substantiating that the hospital was located in a federally designated HMSA as of July 1, 1991 or is applicable as of June 30, 1992. The provisions of this subsection shall no longer apply effective on or after October 1, 1993.

E) Excess Beds. Excess bed information shall be determined in accordance with Public Act 86-268 (Code Section 148.120(a)(3) and 77 Ill. Adm. Code 1100) based upon the methodologies utilized by, and the most current information available to, the Illinois Health Facilities Planning Board as of July 1, 1991. Reviews shall be limited to requests accompanied by documentation from the Illinois Health Facilities Planning Board substantiating that the information supplied to and utilized by the Department was incorrect. The provisions of this subsection shall no longer apply effective on or after October 1, 1993.

F) Medicaid Obstetrical Inpatient Utilization Rates. Medicaid obstetrical inpatient utilization rates shall be calculated in accordance with Section 148.120(a)(4), (a)(9), (a)(10) and (a)(15)(1)(4), (1)(6) and (1)(7). Review shall be limited to verification that Medicaid obstetrical inpatient utilization rates were calculated in accordance with State regulations.

G) TAP Adjustments.

i) Medicaid Percentage. Medicaid inpatient utilization rates shall be calculated in accordance with Section 148.120(a)(1) and (3). Review shall be limited to verification that Medicaid inpatient utilization rates were calculated in accordance with State regulations.

ii) Medicaid Obstetrical Admission Percentage. Medicaid obstetrical admission percentage shall be calculated in accordance with Section 148.120(j)(2) and (a)(11). Review shall be limited to verification that Medicaid obstetrical admission percentages were calculated in accordance with State regulations.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.310(b)(2)(G) (continued)

iii) Medicaid Children's Admission Percentage. Medicaid children's admission percentage shall be calculated in accordance with Section 148.120(j)(4), (a)(2) and (a)(16). Review shall be limited to verification that Medicaid children's admission percentages were calculated in accordance with State regulations.

iv) TAP Bed Limits. The TAP bed limits described in Section 148.120(j)(2)(A)(i), (j)(2)(A)(ii), (j)(3)(A)(i), (j)(3)(A)(ii), (j)(5)(A)(i) and (j)(5)(A)(ii) shall be determined in accordance with such subsections and review shall be limited to verification that these TAP bed limits were determined in accordance with such subsections.

H) CGA Payment Adjustments.

i) Medicaid Perinatal Percentage. Medicaid perinatal percentage shall be calculated in accordance with Section 148.120(6)(A), (a)(12) and (a)(16). Review shall be limited to verification that perinatal percentages were calculated in accordance with State regulations.

ii) Medicaid Obstetrical Percentage. Medicaid obstetrical percentage shall be calculated in accordance with Section 148.120(a)(6)(B), (a)(11) and (a)(15). Review shall be limited to verification that obstetrical percentages were calculated in accordance with State regulations.

c) Outlier Adjustment Reviews

The Department shall make outlier adjustments to payment amounts in accordance with 89 Ill. Adm. Code 149.105 or Section 148.130, whichever is applicable. Hospitals shall be notified of the specific information which shall be utilized in the determination of those services qualified for an outlier adjustment and shall have an opportunity to request a review of such specific information for errors in calculation only. Such a request must be received in writing by the Department within 30 days of after the date of the Department's notice to the hospital of the specific information which shall be utilized in the determination of those services qualified for an outlier adjustment. Such request shall include a clear explanation of the error and documentation of the desired correction. The Department shall notify the hospital of the results

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.310(c) (continued)

of the review within 30 days of after receipt of the hospital's request for review.

d) Cost Report Reviews

- 1) Cost reports are required from:
 - A) All ~~all~~ enrolled hospitals within the State of Illinois;
 - B) All ~~all~~ out-of-state hospitals providing 100 inpatient days of service per hospital fiscal year, to persons covered by the Illinois Medical Assistance Program; and

- C) All ~~all~~ hospitals not located in Illinois that elect to be reimbursed under the methodology described in 89 Ill. Adm. Code 149 (the DRG PPS).

- 2) The completed cost statement with a copy of the hospital's Medicare cost report and audited financial statement must be submitted annually within 90 days of the close of the hospital's fiscal year. A one-time 30-day extension may be requested. Such a request for an extension shall be in writing and shall be received by the Department's Office of Health Finance prior to the end of the 90-day filing period. The Office of Health Finance shall audit the information shown on the Hospital Statement of Reimbursable Cost and Support Schedules. The audit shall be made in accordance with generally accepted auditing standards and shall include tests of the accounting and statistical records and applicable auditing procedures. Hospitals shall be notified of the results of the final audited cost report which may contain adjustments and revisions which may have resulted from the audited Medicare Cost Report. Hospitals shall have the opportunity to request a review of the final audited cost report. Such a request must be received in writing by the Department within 45 days of ~~after~~ the date of the Department's notice to the hospital of the results of the finalized audit. Such request shall include all items of documentation and analysis which support the request for review. No additional data shall be accepted after the 45 day period. The Department shall notify the hospital of the results of the review within 30 days of ~~after~~ receipt of the hospital's request for review.

e) Uncompensated Care Adjustment Reviews

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.310(e) (continued)

The Department shall make uncompensated care adjustments in accordance with Section 148.150. Hospitals shall have the right to appeal the uncompensated care rate calculation or their ineligibility for the uncompensated care rate adjustment if it is believed that a technical error has been made in the calculation. The appeal must be in writing and must be received within 30 days of ~~after~~ the date of the Department's notice to the hospital of its qualification for uncompensated care adjustments and payment adjustment amounts, or a letter of notification that the hospital does not qualify for the uncompensated care payment adjustment. The Department shall notify the hospital of the results of the review within 30 days of ~~after~~ receipt of the hospital's request for review.

f) Trauma Center Adjustment Reviews

- 1) The Department shall make trauma care adjustments in accordance with Section 148.290(c). Hospitals shall have the right to appeal the trauma center adjustment calculations if it is believed that a technical error has been made in the calculation. ~~---The appeal must be in writing and must be received within 30 days of the date of the Department's notice to the hospital of its qualification for uncompensated care adjustments and payment amounts.---The Department shall notify the hospital of the results of the review within 30 days of receipt of the hospital's request for review.~~
- 2) Illinois hospitals located in federally designated HMSAs shall be identified in accordance with 42 CFR 5. 1989, based upon the methodologies utilized by, and the most current information available to the Department from the Department of Health and Human Services as of the first day of July preceding the trauma center adjustment rate period. Review shall be limited to hospitals in locations that have failed to obtain designation as federally designated HMSAs only when such a request for review is accompanied by documentation from the Department of Health and Human Services substantiating that the hospital was located in a federally designated HMSA as of the first day of July preceding the trauma center adjustment rate period.
- 3) Trauma level designation is obtained from the Illinois Department of Public Health as of the first day of July preceding the trauma center adjustment rate period. Review shall be limited to requests accompanied by documentation from the Illinois Department of Public Health, or the licensing agency in the state in which the hospital is located.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.310(f)(3) (continued)

substantiating that the information supplied to and utilized by the Department was incorrect.

- 4) Appeals under subsection (f) must be in writing and must be received within 30 days after the date of the Department's notice to the hospital of its qualification for trauma center adjustments and payment amounts. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

g) Rehabilitation Hospital Adjustment Reviews

The Department shall make rehabilitation hospital adjustments in accordance with Section 148.290(d). Hospitals shall have the right to appeal the rehabilitation hospital adjustment calculations if it is believed that a technical error has been made in the calculation. The appeal must be in writing and must be received within 30 days after the date of the Department's notice to the hospital of its qualification for rehabilitation hospital adjustments and payment adjustment amounts. The Department shall notify the hospital of the results of the review no later than 30 days after receipt of the hospital's request for review.

h) Perinatal Center Adjustment Reviews.

- 1) Medicaid Perinatal Percentage. Medicaid perinatal percentage shall be calculated in accordance with Section 148.290(e). Review shall be limited to verification that perinatal percentages were calculated in accordance with State regulations.
- 2) Perinatal level designation is obtained from the Illinois Department of Public Health as of the first day of July preceding the perinatal center adjustment rate period. Review shall be limited to requests accompanied by documentation from the Illinois Department of Public Health, or the licensing agency in the state in which the hospital is located, substantiating that the information supplied to and utilized by the Department was incorrect.
- 3) Appeals under this subsection (h) must be in writing and must be received within 30 days after the date of the Department's notice to the hospital of its qualification for perinatal center adjustments and payment amounts. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.310 (continued)

i) Obstetrical Care Adjustment Review.

Medicaid Obstetrical Percentage. Medicaid obstetrical percentage shall be calculated in accordance with Section 148.290(f). Review shall be limited to verification that Medicaid obstetrical percentages were calculated in accordance with State regulations. The appeal must be in writing and must be received within 30 days after the date of the Department's notice to the hospital of its qualification for obstetrical care adjustments and payment amounts. The Department shall notify the hospital of the results of the review within 30 days of receipt of the hospital's request for review.

j) TAP Adjustments.

- 1) Medicaid Percentage. Medicaid inpatient utilization rates shall be calculated in accordance with Section 148.120(1)(5). Review shall be limited to verification that Medicaid inpatient utilization rates were calculated in accordance with State regulations.
- 2) Medicaid Obstetrical Admission Percentage. Medicaid obstetrical admission percentage shall be calculated in accordance with Section 148.290(g)(3). Review shall be limited to verification that Medicaid obstetrical admission percentages were calculated in accordance with State regulations.
- 3) Medicaid Children's Admission Percentage. Medicaid children's admission percentage shall be calculated in accordance with Section 148.290(g)(4). Review shall be limited to verification that Medicaid children's admission percentages were calculated in accordance with State regulations.
- 4) TAP Bed Limits. The TAP bed limits described in Section 148.290(g)(1)(C) and (g)(1)(D) shall be determined in accordance with such subsections, and review shall be limited to verification that these TAP bed limits were determined in accordance with such subsections.
- 5) Appeals under subsection (j) of this Section must be in writing and must be received within 30 days after the date of the Department's notice to the hospital of its qualification for targeted access adjustments and payment amounts. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 148.310 (continued)

k) Medicaid High Volume Adjustment Reviews

The Department shall make Medicaid high volume adjustments in accordance with Section 148.290(h). Review shall be limited to verification that the Medicaid inpatient days were calculated in accordance with State regulations. The appeal must be in writing and must be received within 30 days after the date of the Department's notice to the hospital of its qualification for obstetrical care adjustments and payment amounts. The Department shall notify the hospital of the results of the review within 30 days after receipt of the hospital's request for review.

l) Sole Community Hospital Designation Reviews

The Department shall make sole community hospital designations in accordance with 89 Ill. Adm. Code 149.125(b). Hospitals shall have the right to appeal the designation if it believes that a technical error has been made in the determination. The appeal must be made in writing no later than 30 days after notification of the designation. The Department shall notify the hospital of the results of the review no later than 30 days after receipt of the hospital's request for review.

m) Geographic Designation Reviews

A) The Department shall make rural hospital designations in accordance with Section 148.25(g)(3) and 89 Ill. Adm. Code 140.80(1)(11). Hospitals have the right to appeal the designation if it is believed that a technical error has been made in the determination. The appeal must be made in writing no later than 30 days after notification of the designation. The Department shall notify the hospital of the results of the review no later than 30 days after receipt of the hospital's request for review.

B) The Department shall make urban hospital designations in accordance with Section 148.25(g)(4). Hospitals have the right to appeal the designation if it is believed that a technical error has been made in the determination. The appeal must be made in writing no later than 30 days after notification of the designation. The Department shall notify the hospital of the results of the review no later than 30 days after receipt of the hospital's request for review.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

1) Heading of the Part: Medical Payment

2) Code Citation: 89 Ill. Adm. Code 140

3) Section Numbers: Proposed Action:

140.420	Amendment
140.421	Amendment

4) Statutory Authority: Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, par. 12-13) [305 ILCS 5/12-13]

5) Complete Description of the Subjects and Issues Involved: These proposed amendments provide clarifications regarding services under the dental program. A minor change in Section 140.420 specifies that services which are not eligible for payment are detailed in subsection (c). More substantive changes are being proposed to Section 140.421 to fully describe orthodontic treatment which constitutes a covered service. These changes are necessary to eliminate confusion and resolve payment issues which have arisen.

The proposed amendments specify that orthodontic treatment is approved for payment only if it necessary to treat a severely handicapping malocclusion or a dentofacial deformity that seriously impairs an individual's ability to eat, chew or speak. The individual's condition must score at least 42 points on the Salzmann Index, which is used by the Delta Dental Plan of Illinois to evaluate the degree of severity of dental disorders, or result in an inability to eat, chew or speak that is related to the malocclusion.

Implementation of these amendments is not expected to result in any additional expenditures by the Department because the amendments provide clarifications regarding existing policy.

6) Will these proposed amendments replace emergency amendments currently in effect? No

7) Does this rulemaking contain an automatic repeal date? No

8) Do these proposed amendments contain incorporations by reference? No

9) Are there any other proposed amendments pending on this Part? Yes

Sections	Proposed Action	Illinois Register Citation
140.24	Amendment	May 28, 1993 (17 Ill. Reg. 7183)
140.492	Amendment	July 16, 1993 (17 Ill. Reg. 10749)
140.530	Amendment	September 17, 1993 (17 Ill. Reg. 14800)
140.538	Amendment	September 17, 1993 (17 Ill. Reg. 14800)

93

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Sections	Proposed Action	Illinois Register Citation
140.560	Amendment	September 17, 1993 (17 Ill. Reg. 14800)
140.583	Amendment	September 17, 1993 (17 Ill. Reg. 14800.)
140.648	Amendment	September 17, 1993 (17 Ill. Reg. 14800.)

- 10) Statement of Statewide Policy Objectives: These proposed amendments do not affect units of local government.
- 11) Time, Place, and Manner in which Interested Persons may comment on this proposed rulemaking: Any interested parties may submit comments, data, views, or arguments concerning this proposed rulemaking. All comments must be in writing and should be addressed to Joanne Jones, Bureau of Rules and Regulations, Illinois Department of Public Aid, 100 South Grand Ave. E., 3rd Floor, Springfield, Illinois 62762. The Department will consider all written comments it receives within 30 days after the publication of this notice.
- These proposed amendments may have an impact on small businesses, small municipalities, and not for profit corporations as defined in Sections 1-75, 1-80 and 1-85 of the Illinois Administrative Procedure Act. These entities may submit comments in writing to the Department at the above address in accordance with the regulatory flexibility provisions in Section 5-30 of the Illinois Administrative Procedure Act. These entities shall indicate their status as small businesses, small municipalities, or not for profit corporations as part of any written comments they submit to the Department.
- 12) Initial Regulatory Flexibility Analysis:

- A) Date proposed rulemaking was submitted to the Business Assistance Office of the Department of Commerce and Community Affairs: September 9, 1993
- B) Types of small businesses affected: Providers of Dental Services
- C) Reporting, bookkeeping or other procedures required for compliance: None
- D) Types of professional skills necessary for compliance: None
- The full text of the Proposed Amendments begins on the next page:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

TITLE 89: SOCIAL SERVICES

CHAPTER I: DEPARTMENT OF PUBLIC AID

SUBCHAPTER d: MEDICAL PROGRAMS

PART 140

MEDICAL PAYMENT

SUBPART A: GENERAL PROVISIONS

- | | |
|---|---------------|
| Incorporation By Reference | Section 140.1 |
| Medical Assistance Programs | 140.2 |
| Covered Services Under The Medical Assistance Programs for AFDC, AFDC-MANG, AABD, AABD-MANG, RRP, Individuals Under Age 18 Not Eligible for AFDC, Pregnant Women Who Would Be Eligible if the Child Were Born and Pregnant Women and Children Under Age Eight Who Do Not Qualify As Mandatory Categorically Needy | 140.3 |
| Covered Medical Services Under AFDC-MANG for non-pregnant persons who are 18 years of age or older (Repealed) | 140.4 |
| Covered Medical Services Under GA | 140.5 |
| Medical Services Not Covered | 140.6 |
| Medical Assistance Provided to Individuals Under the Age of Eighteen Who Do Not Qualify for AFDC and Children Under Age Eight | 140.7 |
| Medical Assistance For Qualified Severely Impaired Individuals | 140.8 |
| Medical Assistance for a Pregnant Woman Who Would Not Be Categorically Eligible for AFDC/AFDC-MANG if the Child Were Already Born Or Who Do Not Qualify As Mandatory Categorically Needy | 140.9 |
| Medical Assistance Provided to Incarcerated Persons | 140.10 |

SUBPART B: MEDICAL PROVIDER PARTICIPATION

- | | |
|--|----------------|
| Enrollment Conditions for Medical Providers | Section 140.11 |
| Participation Requirements for Medical Providers | 140.12 |
| Definitions | 140.13 |
| Denial of Application to Participate in the Medical Assistance Program | 140.14 |
| Recovery of Money | 140.15 |
| Termination or Suspension of a Vendor's Eligibility to Participate in the Medical Assistance Program | 140.16 |
| Suspension of a Vendor's Eligibility to Participate in the Medical Assistance Program | 140.17 |
| Effect of Termination on Individuals Associated with Vendor | 140.18 |
| Application to Participate or for Reinstatement Subsequent to Termination, Suspension or Barring | 140.19 |
| Submittal of Claims | 140.20 |
| Covered Medicaid Services for Qualified Medicare Beneficiaries (QMBs) | 140.21 |

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

140.22	Magnetic Tape Billings
140.23	Payment of Claims
140.24	Payment Procedures
140.25	Overpayment or Underpayment of Claims
140.26	Payment to Factors Prohibited
140.27	Assignment of Vendor Payments
140.28	Record Requirements for Medical Providers
140.30	Audits
140.31	Emergency Services Audits
140.32	Prohibition on Participation, and Special Permission for Participation
140.33	Publication of List of Terminated, Suspended or Barred Entities
140.35	False Reporting and Other Fraudulent Activities
140.40	Prior Approval for Medical Services or Items
140.41	Prior Approval in Cases of Emergency
140.42	Limitation on Prior Approval
140.43	Post Approval for items or Services When Prior Approval Cannot Be Obtained
140.71	Reimbursement for Medical Services Through the Use of a C-13
140.72	Invoice Voucher Advance Payment and Expedited Payments
140.73	Drug Manual (Recodified)
	Drug Manual Updates (Recodified)

SUBPART C: PROVIDER PARTICIPATION FEES

Section	
140.80	Hospital Provider Fund
140.82	Developmentally Disabled Care Provider Fund
140.84	Long Term Care Provider Fund
140.94	Medicaid Developmentally Disabled Provider Participation Fee Trust Fund/Medicaid Long Term Care Provider Participation Fee Trust Fund
140.95	Hospital Services Trust Fund
140.96	General Requirements (Recodified)
140.97	Special Requirements (Recodified)
140.98	Covered Hospital Services (Recodified)
140.99	Hospital Services Not Covered (Recodified)
140.100	Limitation on Hospital Services (Recodified)
140.101	Transplants (Recodified)
140.102	Heart Transplants (Recodified)
140.103	Liver Transplants (Recodified)
140.104	Bone Marrow Transplants (Recodified)
140.110	Disproportionate Share Hospital Adjustments (Recodified)
140.116	Payment for Inpatient Services for GA (Recodified)
140.117	Hospital Outpatient and Clinic Services (Recodified)
140.200	Payment for Hospital Services During Fiscal Year 1982 (Recodified)
140.201	Payment for Hospital Services After June 30, 1982 (Repealed)
140.202	Payment for Hospital Services During Fiscal Year 1983 (Recodified)
140.203	Limits on Length of Stay by Diagnosis (Recodified)

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

140.300	Payment for Pre-operative Days and Services Which Can Be Performed in an Outpatient Setting (Recodified)
140.350	Copayments (Recodified)
140.360	Payment Methodology (Recodified)
140.361	Non-Participating Hospitals (Recodified)
140.362	Pre July 1, 1989 Services (Recodified)
140.363	Post June 30, 1989 Services (Recodified)
140.364	Prepayment Review (Recodified)
140.365	Base Year Costs (Recodified)
140.366	Restructuring Adjustment (Recodified)
140.367	Inflation Adjustment (Recodified)
140.368	Volume Adjustment (Repealed)
140.369	Groupings (Recodified)
140.370	Rate Calculation (Recodified)
140.371	Payment (Recodified)
140.372	Review Procedure (Recodified)
140.373	Utilization (Repealed)
140.374	Alternatives (Recodified)
140.375	Exemptions (Recodified)
140.376	Utilization, Case-Mix and Discretionary Funds (Repealed)
140.390	Subacute Alcoholism and Substance Abuse Services (Recodified)
140.391	Definitions (Recodified)
140.392	Types of Subacute Alcoholism and Substance Abuse Services (Recodified)
140.394	Payment for Subacute Alcoholism and Substance Abuse Services (Recodified)
140.396	Rate Appeals for Subacute Alcoholism and Substance Abuse Services (Recodified)
140.398	Hearings (Recodified)

SUBPART D: PAYMENT FOR NON-INSTITUTIONAL SERVICES

Section	
140.400	Payment to Practitioners, Nurses and Laboratories
140.410	Physicians' Services
140.411	Covered Services By Physicians
140.412	Services Not Covered By Physicians
140.413	Limitation on Physician Services
140.414	Requirements for Prescriptions and Dispensing of Pharmacy Items - Physicians
140.416	Optometric Services and Materials
140.417	Limitations on Optometric Services
140.418	Department of Corrections Laboratory
140.420	Dental Services
140.421	Limitations on Dental Services
140.422	Requirements for Prescriptions and Dispensing Items of Pharmacy Items - Dentists
140.425	Podiatry Services

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

140.477 Limitations on Equipment, Supplies and Prosthetic Devices
 140.478 Prior Approval for Medical Equipment, Supplies and Prosthetic Devices
 140.479 Limitations, Medical Supplies
 140.480 Equipment Rental Limitations
 140.481 Payment for Medical Equipment, Supplies and Prosthetic Devices
 140.482 Family Planning Services
 140.483 Limitations on Family Planning Services
 140.484 Payment for Family Planning Services
 140.485 Healthy Kids Program
 140.486 Limitations on Medicare Services (Repealed)
 140.487 Healthy Kids Program Timeliness Standards
 140.488 Periodicity Schedules, Immunizations and Diagnostic Laboratory Procedures
 140.490 Medical Transportation
 140.491 Limitations on Medical Transportation
 140.492 Payment for Medical Transportation
 EMERGENCY
 140.495 Psychological Services
 140.496 Payment for Psychological Services
 140.497 Hearing Aids

SUBPART E: GROUP CARE

Section
 140.500 Group Care Services
 140.502 Cessation of Payment at Federal Direction
 140.503 Cessation of Payment for Improper Level of Care
 140.504 Cessation of Payment Because of Termination of Facility
 140.505 Continuation of Payment Because of Threat To Life
 140.506 Provider Voluntary Withdrawal
 140.507 Continuation of Provider Agreement
 140.510 Determination of Need for Group Care
 140.511 Long Term Care Services Covered By Department Payment
 140.512 Utilization Control
 140.513 Utilization Review Plan (Repealed)
 140.514 Certifications and Recertifications of Care
 140.515 Management of Recipient Funds--Personal Allowance Funds
 140.516 Recipient Management of Funds
 140.517 Correspondent Management of Funds
 140.518 Facility Management of Funds
 140.519 Use or Accumulation of Funds
 140.520 Management of Recipient Funds--Local Office Responsibility
 140.521 Room and Board Accounts
 140.522 Reconciliation of Recipient Funds
 140.523 Bed Reserves
 140.524 Cessation of Payment Due to Loss of License
 140.525 Quality Incentive Program (QUIP) Payment Levels

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

140.426 Limitations on Podiatry Services
 140.427 Requirement for Prescriptions and Dispensing of Pharmacy Items - Podiatry
 140.428 Chiropractic Services
 140.429 Limitations on Chiropractic Services (Repealed)
 140.430 Independent Laboratory Services
 140.431 Services Not Covered by Independent Laboratory
 140.432 Limitations on Independent Laboratory Services
 140.433 Payment for Laboratory Services
 140.434 Record Requirements for Independent Laboratories
 140.435 Nurse Services
 140.436 Limitations on Nurse Services
 140.440 Pharmacy Services
 140.441 Pharmacy Services Not Covered
 140.442 Prior Approval of Prescriptions
 140.443 Filling of Prescriptions
 140.444 Compounded Prescriptions
 140.445 Prescription Items (Not Compounded)
 140.446 Over-the-Counter Items
 140.447 Reimbursement
 140.448 Returned Pharmacy Items
 140.449 Payment of Pharmacy Items
 140.450 Record Requirements for Pharmacies
 140.452 Mental Health Clinic Services
 140.453 Definitions
 140.454 Types of Mental Health Clinic Services
 140.455 Payment for Mental Health Clinic Services
 140.456 Hearings
 140.457 Therapy Services
 140.458 Prior Approval for Therapy Services
 140.459 Payment for Therapy Services
 140.460 Clinic Services
 140.461 Clinic Participation Requirements
 140.462 Covered Services in Clinics
 140.463 Clinic Service Payment
 140.464 Psychiatric Clinics (Hospital-based)
 140.465 Speech and Hearing Clinics (Repealed)
 140.466 Rural Health Clinics
 140.467 Independent Clinics
 140.469 Hospice
 140.470 Home Health Services
 140.471 Home Health Covered Services
 140.472 Types of Home Health Services
 140.473 Prior Approval for Home Health Services
 140.474 Payment for Home Health Services
 140.475 Medical Equipment, Supplies and Prosthetic Devices
 140.476 Medical Equipment, Supplies and Prosthetic Devices for Which Payment Will Not Be Made

NOTICE OF PROPOSED AMENDMENTS

140.526	Quality Incentive Standards and Criteria for the Quality Incentive Program (QUIP) (Repealed)
140.527	Quality Incentive Survey (Repealed)
140.528	Payment of Quality Incentive (Repealed)
140.529	Reviews (Repealed)
140.530	Basis of Payment for Long Term Care Services
EMERGENCY	
140.531	General Service Costs
140.532	Health Care Costs
140.533	General Administration Costs
140.534	Ownership Costs
140.535	Costs for Interest, Taxes and Rent
140.536	Organization and Pre-Operating Costs
140.537	Payments to Related Organizations
140.538	Special Costs
EMERGENCY	
140.539	Nurse's Aide Training and Testing
140.540	Costs Associated With Nursing Home Care Reform Act and Implementing Regulations
140.541	Salaries Paid to Owners or Related Parties
140.542	Cost Reports-Filing Requirements
140.543	Time Standards for Filing Cost Reports
140.544	Access to Cost Reports (Repealed)
140.545	Penalty for Failure to File Cost Reports
140.550	Update of Operating Costs
140.551	General Service Costs
140.552	Nursing and Program Costs
140.553	General Administrative Costs
140.554	Component Inflation Index
140.555	Minimum Wage
140.560	Components of the Base Rate Determination
EMERGENCY	
140.561	Support Costs Components
140.562	Nursing Costs
140.563	Capital Costs
140.565	Kosher Kitchen Reimbursement
140.566	Out-of-State Placement
140.567	Level II Incentive Payments (Repealed)
140.568	Duration of Incentive Payments (Repealed)
140.569	Clients With Exceptional Care Needs
140.570	Capital Rate Component Determination
140.571	Capital Rate Calculation
140.572	Total Capital Rate
140.573	Other Capital Provisions
140.574	Capital Rates for Rented Facilities
140.575	Newly Constructed Facilities (Repealed)
140.576	Renovations (Repealed)
140.577	Capital Costs for Rented Facilities (Renumbered)

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

140.578	Property Taxes
140.579	Specialized Living Centers
140.580	Mandated Capital Improvements (Repealed)
140.581	Qualifying as Mandated Capital Improvement (Repealed)
140.582	Cost Adjustments
140.583	Campus Facilities
EMERGENCY	
140.584	Illinois Municipal Retirement Fund (IMRF)
140.590	Audit and Record Requirements
140.642	Screening Assessment for Long Term Care and Alternative Residential Settings and Services
140.643	In-Home Care Program
140.645	Medical and In-Home Care For Disabled Persons Under Age 21
140.646	Reimbursement for Developmental Training (DT) Services for Individuals With Developmental Disabilities Who Reside in Long Term Care (ICF and SNF) and Residential (ICF/MR) Facilities
140.647	Description of Developmental Training (DT) Services
140.648	Determination of the Amount of Reimbursement for Developmental Training (DT) Programs
EMERGENCY	
140.649	Effective Dates of Reimbursement for Developmental Training (DT) Programs
140.650	Certification of Developmental Training (DT) Programs
140.651	Decertification of Day Programs
140.652	Terms of Assurances and Contracts
140.680	Effective Date Of Payment Rate
140.700	Discharge of Long Term Care Residents
140.830	Appeals of Rate Determinations
140.835	Determination of Cap on Payments for Long Term Care (Repealed)
Section	
140.850	General Description
140.855	Definition of Terms
140.860	Covered Services
140.865	Sponsor Qualifications
140.870	Sponsor Responsibilities
140.875	Department Responsibilities
140.880	Provider Qualifications
140.885	Provider Responsibilities
140.890	Payment Methodology
140.895	Contract Monitoring
140.896	Reimbursement For Program Costs (Active Treatment) For Clients in Long Term Care Facilities For the Developmentally Disabled (Recodified)

SUBPART F: MEDICAID PARTNERSHIP PROGRAM

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

SUBPART G: REIMBURSEMENT FOR NURSING COSTS FOR GERIATRIC FACILITIES

Section	
140.900	Reimbursement For Nursing Costs For Geriatric Residents in Group Care Facilities (Recodified)
140.901	Functional Areas of Needs (Recodified)
140.902	Service Needs (Recodified)
140.903	Definitions (Recodified)
140.904	Times and Staff Levels (Repealed)
140.905	Statewide Rates (Repealed)
140.906	Reconsiderations (Recodified)
140.907	Midnight Census Report (Recodified)
140.908	Times and Staff Levels (Recodified)
140.909	Statewide Rates (Recodified)
140.910	Referrals (Recodified)
140.911	Basic Rehabilitation Aide Training Program (Recodified)
140.912	Interim Nursing Rates (Recodified)

SUBPART H: ILLINOIS COMPETITIVE ACCESS AND REIMBURSEMENT EQUITY (ICARE) PROGRAM

Section	
140.940	Illinois Competitive Access and Reimbursement Equity (ICARE) Program (Recodified)
140.942	Definition of Terms (Recodified)
140.944	Notification of Negotiations (Recodified)
140.946	Hospital Participation in ICARE Program Negotiations (Recodified)
140.948	Negotiation Procedures (Recodified)
140.950	Factors Considered in Awarding ICARE Contracts (Recodified)
140.952	Closing an ICARE Area (Recodified)
140.954	Administrative Review (Recodified)
140.956	Payments to Contracting Hospitals (Recodified)
140.958	Admitting and Clinical Privileges (Recodified)
140.960	Inpatient Hospital Care or Services by Non-Contracting Hospitals Eligible for Payment (Recodified)
140.962	Payment to Hospitals for Inpatient Services or Care not Provided under the ICARE Program (Recodified)
140.964	Contract Monitoring (Recodified)
140.966	Transfer of Recipients (Recodified)
140.968	Validity of Contracts (Recodified)
140.970	Termination of ICARE Contracts (Recodified)
140.972	Hospital Services Procurement Advisory Board (Recodified)
140.980	Elimination Of Aid To The Medically Indigent (AMI) Program (Emergency Expired)
140.982	Elimination Of Hospital Services For Persons Age Eighteen (18) And Older And Persons Married And Living With Spouse, Regardless Of Age (Emergency Expired)

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

140.TABLE A	Medichek Recommended Screening Procedures (Repealed)
140.TABLE B	Health Service Areas
140.TABLE C	Capital Cost Areas
140.TABLE D	Schedule of Dental Procedures
140.TABLE E	Time Limits for Processing of Prior Approval Requests
140.TABLE F	Podiatry Service Schedule
140.TABLE G	Travel Distance Standards
140.TABLE H	Areas of Major Life Activity
140.TABLE I	Staff Time and Allocation for Training Programs (Recodified)
140.TABLE J	HSA Grouping (Repealed)
140.TABLE K	Services Qualifying for 10% Add-On
140.TABLE L	Services Qualifying for 10% Add-On to Surgical Incentive Add-On

AUTHORITY: Implementing Article III of the Illinois Health Finance Reform Act (Ill. Rev. Stat. 1991, ch. 111 1/2, par. 6503-1 et seq.) [20 ILCS 2215/3-1 et seq.] and implementing and authorized by Articles III, IV, V, VI, VII and Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, pars. 3-1 et seq., 4-1 et seq., 5-1 et seq., 6-1 et seq., 7-1 et seq., and 12-13) [305 ILCS 5/3, 4, 5, 6, 7, and 12-13]

SOURCE: Adopted at 3 Ill. Reg. 24, p. 166, effective June 10, 1979; rule repealed and new rule adopted at 6 Ill. Reg. 8374, effective July 6, 1982; emergency amendment at 6 Ill. Reg. 8508, effective July 6, 1982, for a maximum of 150 days; amended at 7 Ill. Reg. 681, effective December 30, 1982; amended at 7 Ill. Reg. 7956, effective July 1, 1983; amended at 7 Ill. Reg. 8308, effective July 1, 1983; amended at 7 Ill. Reg. 8271, effective July 5, 1983; emergency amendment at 7 Ill. Reg. 8354, effective July 5, 1983, for a maximum of 150 days; amended at 7 Ill. Reg. 8540, effective July 15, 1983; amended at 7 Ill. Reg. 9382, effective July 22, 1983; amended at 7 Ill. Reg. 12868, effective September 20, 1983; peremptory amendment at 7 Ill. Reg. 15047, effective October 31, 1983; amended at 7 Ill. Reg. 17358, effective December 21, 1983; amended at 8 Ill. Reg. 254, effective December 21, 1983; emergency amendment at 8 Ill. Reg. 580, effective January 1, 1984, for a maximum of 150 days; recodified at 8 Ill. Reg. 2483; amended at 8 Ill. Reg. 3012, effective February 22, 1984; amended at 8 Ill. Reg. 5262, effective April 9, 1984; amended at 8 Ill. Reg. 6785, effective April 27, 1984; amended at 8 Ill. Reg. 6983, effective May 9, 1984; amended at 8 Ill. Reg. 7258, effective May 16, 1984; emergency amendment at 8 Ill. Reg. 7910, effective May 22, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 7910, effective June 1, 1984; amended at 8 Ill. Reg. 10032, effective June 18, 1984; emergency amendment at 8 Ill. Reg. 10062, effective June 20, 1984, for a maximum of 150 days; amended at 8 Ill. Reg. 13343, effective July 17, 1984; amended at 8 Ill. Reg. 13779, effective July 24, 1984; Sections 140.72 and 140.73 recodified to 89 Ill. Adm. Code 141 at 8 Ill. Reg. 16354; amended (by adding sections being codified with no substantive change) at 8 Ill. Reg. 17899; peremptory amendment at 8 Ill. Reg. 18151, effective September 18, 1984; amended at 8 Ill. Reg. 21629, effective October 19, 1984; peremptory amendment at 8 Ill. Reg. 21677, effective October 24, 1984; amended at 8 Ill. Reg. 22097, effective October

NOTICE OF PROPOSED AMENDMENTS

for a maximum of 150 days; emergency amendment at 14 Ill. Reg. 14570, effective August 22, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 14826, effective August 31, 1990; amended at 14 Ill. Reg. 15366, effective September 12, 1990; amended at 14 Ill. Reg. 15981, effective September 21, 1990; amended at 14 Ill. Reg. 17279, effective October 12, 1990; amended at 14 Ill. Reg. 18057, effective October 22, 1990; amended at 14 Ill. Reg. 18508, effective October 30, 1990; amended at 14 Ill. Reg. 18813, effective November 6, 1990; amended at 14 Ill. Reg. 20478, effective December 7, 1990; amended at 14 Ill. Reg. 20729, effective December 12, 1990; amended at 15 Ill. Reg. 298, effective December 28, 1990; emergency amendment at 15 Ill. Reg. 592, effective January 1, 1991, for a maximum of 150 days; amended at 15 Ill. Reg. 1051, effective January 18, 1991; Section 140.569 withdrawn at 15 Ill. Reg. 1174; amended at 15 Ill. Reg. 6220, effective April 18, 1991; amended at 15 Ill. Reg. 6534, effective April 30, 1991; amended at 15 Ill. Reg. 8264, effective May 23, 1991; amended at 15 Ill. Reg. 8972, effective June 17, 1991; amended at 15 Ill. Reg. 10114, effective June 21, 1991; amended at 15 Ill. Reg. 10468, effective July 1, 1991; amended at 15 Ill. Reg. 11176, effective August 1, 1991; emergency amendment at 15 Ill. Reg. 11515, effective July 25, 1991, for a maximum of 150 days; emergency expired December 22, 1991; emergency amendment at 15 Ill. Reg. 12919, effective August 15, 1991, for a maximum of 150 days; emergency expired January 12, 1992; emergency amendment at 15 Ill. Reg. 16366, effective October 22, 1991, for a maximum of 150 days; amended at 15 Ill. Reg. 17318, effective November 18, 1991; amended at 15 Ill. Reg. 17733, effective November 22, 1991; emergency amendment at 16 Ill. Reg. 300, effective December 20, 1991, for a maximum of 150 days; amended at 16 Ill. Reg. 174, effective December 24, 1991; amended at 16 Ill. Reg. 1877, effective January 24, 1992; amended at 16 Ill. Reg. 3552, effective February 28, 1992; amended at 16 Ill. Reg. 4006, effective March 6, 1992; amended at 16 Ill. Reg. 6408, effective March 20, 1992; amended at 16 Ill. Reg. 6849, effective April 7, 1992; amended at 16 Ill. Reg. 7017, effective April 17, 1992; amended at 16 Ill. Reg. 10050, effective June 5, 1992; amended at 16 Ill. Reg. 11174, effective June 26, 1992; expedited correction at 16 Ill. Reg. 11348, effective March 20, 1992; emergency amendment at 16 Ill. Reg. 11947, effective July 10, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 12186, effective July 24, 1992; emergency amendment at 16 Ill. Reg. 13337, effective August 14, 1992, for a maximum of 150 days; emergency amendment at 16 Ill. Reg. 15109, effective September 21, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 15561, effective September 30, 1992; amended at 16 Ill. Reg. 17302, effective November 2, 1992; emergency amendment at 16 Ill. Reg. 18097, effective November 17, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 19146, effective December 1, 1992; amended at 16 Ill. Reg. 19879, effective December 7, 1992; amended at 17 Ill. Reg. 837, effective January 11, 1993; amended at 17 Ill. Reg. 1112, effective January 15, 1993; amended at 17 Ill. Reg. 2290, effective February 15, 1993; amended at 17 Ill. Reg. 2951, effective February 17, 1993; amended at 17 Ill. Reg. 3421, effective February 19, 1993; amended at 17 Ill. Reg. 6196, effective April 5, 1993; amended at 17 Ill. Reg. 6839, effective April 21, 1993; amended at 17 Ill. Reg. 7004, effective May 17, 1993; expedited correction at 17 Ill. Reg. 7078, effective

December 1, 1992; emergency amendment at 17 Ill. Reg. 11201, effective July 1, 1993, for a maximum of 150 days; emergency amendment at 17 Ill. Reg. 15162, effective September 2, 1993, for a maximum of 150 days; amended at 17 Ill. Reg. _____, effective _____.

NOTE: CAPITALIZATION DENOTES STATUTORY LANGUAGE.

SUBPART D: PAYMENT FOR NON-INSTITUTIONAL SERVICES

Section 140.420 Dental Services

- a) Payment for dental services shall be made only to licensed dentists. Payment for comprehensive orthodontic care shall be made only to a dentist licensed for provision of such services.
- b) Except for the "services not covered" specified in subsection (c) below, payment shall be made for dental services that are:
 - 1) Necessary to relieve pain or infection, preserve teeth, or restore adequate dental function.
 - 2) Diagnostic, preventive, or restorative services, endodontics, prosthodontics, orthodontics or oral surgery included in the Department's Schedule of Dental Procedures (see Table D at the end of this Part);
 - 3) Performed by the dentist or under the direct supervision of the dentist.
- c) Services for which payment shall not be made include:
 - 1) Routine or periodic examination other than:
 - A) Initial examinations;
 - B) Required school examinations;
 - C) Periodic examinations for children with minimum of 12 months having elapsed since initial or previous periodic examination;
 - 2) Partial dentures, bridges, pontics for adults (persons over age 20);
 - 3) Orthodontics, posterior endodontics, apexification (a procedure to close an open end of a root) and periodontics for adults;

NOTICE OF PROPOSED AMENDMENTS

Section 140.420(c) (continued)

- 4) Experimental dental care;
- 5) Procedures performed only for cosmetic reasons;
- 6) Acrylic crown;
- 7) Fluoride for adults;
- 8) Space maintainers for adults;
- 9) Alveoloplasty (surgical preparation of gum ridge for dentures) and frenulectomy (cutting through soft tissue impeding tongue movement) for adults.

(Source: Amended at 17 Ill. Reg. ____, effective ____)

Section 140.421 Limitations on Dental Services

a) Prior approval is required for:

- 1) Space maintainers (will not be approved if for an adult, as defined in Section 140.420(c)(2));

- 2) Crowns;

- 3) Endodontics;

- 4) Periodontics;

- 5) Dentures;

- 6) Bridgework;

- 7) Orthodontics (will not be approved for an adult, as defined in Section 140.20(c)(2)). ~~(to be approved, the procedure must be to treat a severe handicapping malocclusion or a handicapping dento-facial deformity)~~ Orthodontic treatment is approved for children under the dental program only if necessary to treat a severely handicapping malocclusion or dento-facial deformity. A severely handicapping malocclusion or dento-facial deformity is defined as a condition which severely impairs an individual's ability to eat, chew or speak. In order to qualify for benefits under the dental program, the individual's condition must score at least 42 points on the Salzmann Index or result in an inability to eat, chew or speak that is related to the malocclusion;

NOTICE OF PROPOSED AMENDMENTS

Section 140.421(a) (continued)

- 8) Extraction of impacted teeth;
- 9) Alveoloplasty (will not be approved if for an adult, as defined in Section 140.420(c)(2));
- 10) Cyst excisions;
- 11) Frenulectomy (will not be approved if for an adult, as defined in Section 140.420(c)(2));
- 12) Analgesia (nitrous oxide);
- 13) Dental services not included in the Department's Schedule of Dental Procedures (See Table D at the end of this Part).

b) The dentist may request post-approval when a dental procedure requiring prior approval is provided on an emergency basis. Approval of the procedures shall be given if, in the judgment of a consulting dentist of the Department or a consulting dental service, the procedure is necessary to prevent dental disease or to restore and maintain adequate dental function to assure good bodily health and the well-being of the patient.

c) Payment for complete and partial dentures is limited to one set every five years if necessary to replace lost, broken or unusable dentures; payment for a bridge is limited to once in five years. Bridgework will be reimbursed only if there has not been placement of a partial denture within the prior five years.

d) Root canals, apexification, and apicoectomy procedures are covered for children for anterior teeth, bicuspsids, and permanent first molars. Root canals are covered for adults only for anterior teeth.

e) Full Mouth series of x-rays are covered only once every three years.

(Source: Amended at 17 Ill. Reg. ____, effective ____)

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

1) Heading of the Part: Rights and Responsibilities2) Code Citation: 89 Ill. Adm. Code 1023) Section Numbers: Proposed Action:

102.200	Amendment
102.210	Amendment
102.220	Amendment
102.230	Amendment
102.235	New Section
102.240	Amendment
102.250	Amendment

4) Statutory Authority: Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, pars. 12-13) [305 ILCS 5/12-13] and Public Act 88-85 [305 ILCS 5/3-9] (from ch. 23, par. 319), [305 ILCS 5/3-10] (from ch. 23, par. 3-10) [305 ILCS 5/5-13] (from ch. 23, par. 5-13) [305 ILCS 5/5-13.5 new]

5) Complete Description of the Subjects and Issues Involved: This rulemaking is necessary to implement the provisions of Public Act 88-85 regarding the recovery of assistance, real property liens and estate claims. As the result of these proposed amendments, on the death of a person who has been a recipient, the Department will be able to file a claim against that person's estate or against the estate of that person's surviving spouse for the total amount paid to or in behalf of the recipient. The Department's claim against the estate of a deceased recipient or the deceased recipient's surviving spouse will encompass all income maintenance assistance paid out at any time, and either all medical assistance paid out at any time for a permanently institutionalized recipient whose real property is subject to the Department's lien or all medical assistance paid out for a recipient while 65 years of age or older. In addition, the Department's lien against a recipient's real property will encompass all medical assistance paid out at any time for a permanently institutionalized recipient on or after July 14, 1993, and all income maintenance assistance paid to or on behalf of a recipient on or after the following dates:

Assistance Program	Effective Date
AABD(A)	January, 1962
AABD(B) and (D)	November, 1963

These proposed amendments also remove the exemption for the filing of a lien against homestead property owned by a recipient of AABD with a market value of less than \$25,000 and allows for the filing of a lien against a

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

permanently institutionalized MANG(A), (B) or (D) recipient. The Department will now be able to file a lien against the homestead property owned by any recipient of AABD as well as permanently institutionalized recipients of MANG(A), (B) or (D), except as provided in Section 102.235. However, an individual who applies for or receives financial or medical assistance, social services or food stamp benefits will have the right to appeal a decision under Section 102.235 to file a lien on the real property, including the home, of a permanently institutionalized recipient.

These proposed amendments also permit the Department to defer foreclosure of a lien on homestead property, except in case of fraud, if the property is occupied by the recipient or the recipient's surviving spouse, child under 21, or child over 21 who is blind or permanently and totally disabled. In the case of a permanently institutionalized recipient, the Department will defer foreclosure of a lien on homestead property if a sibling of the recipient has resided continuously in the property since as least one year immediately before the date the recipient was admitted to the institution or if a child of the recipient who has resided continuously in the property since at least two years immediately before the date the recipient was admitted to the institution establishes that he or she provided care for at least two years before admission that enabled the recipient to live at home rather than in an institution.

These proposed amendments include provisions which allow the Department to release a lien when a MANG(A), (B) or (D) recipient has been medically discharged from an institution and returns to his or her home on which the Department holds a lien.

6) Will these proposed amendments replace emergency amendments currently in effect? No

7) Does this rulemaking contain an automatic repeal date? No

8) Do these proposed amendments contain incorporations by reference? No

9) Are there any other proposed amendments pending on this Part? No

10) Statement of Statewide Policy Objectives: These proposed amendments do not affect units of local government.

11) Time, Place, and Manner in which Interested Persons may comment on this proposed rulemaking: Any interested parties may submit comments, data, views, or arguments concerning this proposed rulemaking. All comments must be in writing and should be addressed to Judy Umunna, Bureau of Rules and Regulations, Illinois Department of Public Aid, 100 South Grand Ave., E., 3rd Floor, Springfield, Illinois 62762. The Department will consider all written comments it receives within 30 days after the publication of this notice.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

12) Initial Regulatory Flexibility Analysis:

A) Date proposed rulemaking was submitted to the Business Assistance Office of the Department of Commerce and Community Affairs: Not applicable

B) Types of small businesses affected: None

C) Reporting, bookkeeping or other procedures required for compliance: None

D) Types of professional skills necessary for compliance: None

The full text of the Proposed Amendments begins on the next page:

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

TITLE 89: SOCIAL SERVICES
CHAPTER I: DEPARTMENT OF PUBLIC AID
SUBCHAPTER a: GENERAL PROVISIONS

PART 102

RIGHTS AND RESPONSIBILITIES

Section	
102.1	Incorporation By Reference
102.10	Rights of Clients
102.20	Nondiscrimination
102.25	Grievance Rights of Clients
102.30	Confidentiality of Case Information
102.35	Case Records
102.40	Freedom of Choice
102.50	Reporting Change of Circumstances
102.60	Referral Requirements
102.63	Reporting Child Abuse/Neglect
102.66	Suitability of Home
102.70	Notice to Client
102.80	Right to Appeal
102.81	Continuation of Assistance Pending Appeal
102.82	Time Limit for Filing an Appeal
102.83	Examining Department Records
102.84	Child Care
102.90	Voluntary Repayment of Assistance
102.100	Excess Assistance (Recodified)
102.110	Recoupment of Overpayments (Recodified)
102.120	Correction of Underpayments
102.200	Recovery of Assistance
102.210	Estate Claims
102.220	Real Property Liens
102.230	Filing and Renewal of Liens
102.235	Liens on Property of Institutionalized Recipients
102.240	Foreclosure of Liens
102.250	Release of Liens
102.260	Personal Injury Claims
102.270	Convictions of Fraud - Eligibility
102.280	Single Conviction of Fraud - Administrative Review Board

AUTHORITY: Implementing Article XI and authorized by Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1989 1991, ch. 23, pars. 11-1 et seq. and 12-13) [305 ILCS 5/11-1 and 12-13]

SOURCE: Filed and effective December 31, 1977; peremptory rule at 2 Ill. Reg. 52, p. 449, effective December 13, 1978; amended at 2 Ill. Reg. 52, p. 462, December 23, 1978; peremptory amendment at 3 Ill. Reg. 11, p. 39, effective March 1, 1979; amended at 3 Ill. Reg. 41, p. 167, effective October 1, 1979;

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

amended at 3 Ill. Reg. 43, p. 196, effective October 15, 1979; amended at 5 Ill. Reg. 8035, effective July 27, 1981; amended at 5 Ill. Reg. 10775, effective October 1, 1981; amended at 6 Ill. Reg. 894, effective January 7, 1982; codified at 7 Ill. Reg. 5706; amended at 7 Ill. Reg. 8350, effective July 1, 1983; amended at 8 Ill. Reg. 18910, effective September 26, 1984; amended at 9 Ill. Reg. 327, effective December 31, 1984; amended at 9 Ill. Reg. 3730, effective March 13, 1985; amended at 9 Ill. Reg. 6812, effective April 26, 1985; amended at 9 Ill. Reg. 7162, effective May 1, 1985; amended at 9 Ill. Reg. 13091, effective August 16, 1985; amended at 9 Ill. Reg. 14704, effective September 13, 1985; amended at 9 Ill. Reg. 15912, effective October 4, 1985; amended at 10 Ill. Reg. 3981, effective February 22, 1986; amended at 10 Ill. Reg. 14795, effective August 29, 1986; amended at 10 Ill. Reg. 19088, effective October 24, 1986; Sections 102.100 and 102.110 recodified to 89 Ill. Adm. Code 165 at 10 Ill. Reg. 21094; amended at 11 Ill. Reg. 14067, effective August 10, 1987; amended at 11 Ill. Reg. 18239, effective October 30, 1987; Reg. 3940, effective March 10, 1989; amended at 14 Ill. Reg. 13279, effective August 6, 1990; emergency amendment at 14 Ill. Reg. 20078, effective December 3, 1990, for a maximum of 150 days; amended at 15 Ill. Reg. 7202, effective April 30, 1991; amended at 17 Ill. Reg. _____, effective _____.

NOTE: CAPITALIZATION DENOTES STATUTORY LANGUAGE

Section 102.200 Recovery of Assistance

- a) By means of claims against the estates of deceased recipients and the estates of their surviving spouses and liens against recipients' real property interests, the Department has a statutory right to recover assistance provided to or in behalf of recipients according to the terms prescribed in this Section rule.

- b) The Department shall effect its recoveries by one of the following actions:

- 1) acceptance of an amount, as settlement, equal to the estimated amount which would be collected if the estate were administered or the lien foreclosed;
- 2) administration of the estate; or
- 3) foreclosure of the lien.

- c) When the Department has both an estate claim and a real property lien, collection of the claim and lien shall be by one action.

(Source: Amended at 17 Ill. Reg. _____, effective _____.)

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 102.210 Estate Claims

- a) The Department's claim against the estate of a deceased recipient or the deceased recipient's surviving spouse shall encompass all income maintenance assistance paid out at any time and all medical assistance paid out for a recipient while 65 years of age or older.

- 1) all income maintenance assistance paid out at any time, and either
- 2) all medical assistance paid out at any time for a permanently institutionalized recipient whose real property is subject to the Department's lien, or
- 3) all medical assistance paid out for a recipient while 65 years of age or older.

- b) The claim shall apply to assistance provided to or in behalf of a recipient on or after the following dates:

Assistance Program	Effective Date
1) AABD (Aged) (AABD(A))	1) 1963
2) AABD (Blind) and (Disabled)	2) November, 1963
3) AABD(B) and (D)) MANG (Blind), and (Disabled) (MANG(A),(B), and (D))	3) January 1, 1966

- c) The Department shall not enforce a claim for medical assistance against any property, real or personal, of a deceased recipient while one or more of the following relatives survives: spouse of decedent, child under 21, or child over 21 who is blind or permanently and totally disabled.

- d) The Department shall not enforce a claim for income maintenance assistance against homestead property of a deceased recipient while the homestead is occupied by one or more of the surviving relatives previously specified.

- e) The Department may defer or waive enforcement of its claim for income maintenance assistance if it determines that:

- 1) The deceased recipient is survived by a dependent spouse and minor child or children; or

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 102.210(e) (continued)

- 2) Rehabilitative training for employment or other means of self-support for the surviving spouse or children is feasible, and deferment or waiver will facilitate achievement of self-support status and prevent or reduce the likelihood of return to dependency on public assistance of the spouse or children.

(Source: Amended at 17 Ill. Reg. ____, effective ____)

Section 102.220 Real Property Liens

The Department's lien against a recipient's real property shall encompass: all income-maintenance-assistance-paid-out-at-any-time-and-shall-represent assistance-provided-to-or-on-behalf-of-a-recipient-on-or-after-the-following dates:

- a) all medical assistance paid out at any time for a permanently institutionalized recipient on or after July 14, 1993, and
- b) all income maintenance assistance paid to or on behalf of a recipient on or after the following dates:

Assistance Program	Effective Date
AABD(A)	January, 1962
AABD(B) and (D)	November, 1963

(Source: Amended at 17 Ill. Reg. ____, effective ____)

Section 102.230 Filing and Renewal of Liens

- a) The Department shall file a lien against:

- 1) The homestead property owned by: a-recipient-of-AABD-with-a market-value-of-\$25,000-or-more;

A) a recipient of AABD; or

B) a permanently institutionalized recipient of MANG(A). (B) or (D), except as provided in Section 102.235;

- 2) Any other legal or equitable real property interests, regardless of value, which a the recipient possesses unless the property is located outside the State of Illinois; and

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 102.230(a) (continued)

- 3) Any mobile home, owned and occupied by a recipient as a homestead, for which a certificate of title is required by the Illinois Vehicle Title and Registration Law (Ill. Rev. Stat. 1983 1991, ch. 95 1/2, pars. 3-100 et seq.). [625 ILCS 5/3-100]
- b) The lien shall be renewed every five years by the Department until it is satisfied.

(Source: Amended at 17 Ill. Reg. ____, effective ____)

Section 102.235 Liens on Property of Institutionalized Recipients

- a) Except as provided in subsection (b) below, the Department shall file a lien on all real property, including the home, of a recipient of MANG(A), (B) or (D) who it determines to be permanently institutionalized, i.e., cannot reasonably be expected to be discharged and return home from a long term care institution.
- b) The Department will not file a lien on the home if it is occupied by the permanently institutionalized recipient's spouse, minor or disabled or blind child, or sibling who has an equity interest in the home and has legally resided in it continuously for at least one year immediately before the date the recipient was admitted to a long term care institution.

- c) There shall be a rebuttable presumption of permanent institutionalization when a recipient has resided for at least 120 calendar days in one or more institutions for long term care.

- d) The Department shall provide the recipient with at least 10 calendar days advance notice of its intention to file a lien on the recipient's real property, based on its determination that the recipient is permanently institutionalized, and of the recipient's right to request and obtain a fair hearing on this determination.

(Source: Added at 17 Ill. Reg. ____, effective ____)

Section 102.240 Foreclosure of Liens

- a) The Department may enforce a lien by foreclosure:

- 1) At any time when there is a transfer of a recipient's real property subject to the lien;

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 102.240(a) (continued)

- 2) In case of fraud; or
- 3) At the time of the recipient's death.
- b) The Department shall defer foreclosure of a lien on homestead property, except in case of fraud, if: the property is occupied by the recipient or the recipient's surviving spouse, child under 21, or child over 21 who is blind or permanently and totally disabled, or permanently and totally disabled, or
- 1) the property is occupied by the recipient or the recipient's surviving spouse, child under 21, or child over 21 who is blind or permanently and totally disabled, or
- 2) in the case of a permanently institutionalized recipient.
 - A) a sibling of the recipient has resided continuously in the property since at least one year immediately before the date the recipient was admitted to the institution, or
 - B) a child of the recipient who has resided continuously in the property since at least two years immediately before the date the recipient was admitted to the institution establishes that he or she provided care for at least two years before admission that enabled the recipient to live at home rather than in an institution.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

Section 102.250 Release of Liens

- a) The Department shall release a lien when:
 - 1) The Department receives full repayment of the assistance granted subject to the lien;
 - 2) A bond is filed, with a surety or sureties acceptable to the Department, which guarantees payment of the amount of the lien; or
 - 3) The lien was filed in error.
 - 4) A MANG(A), (B) or (D) recipient has been medically discharged from an institution and returns to his or her home on which the Department holds a lien.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section 102.250 (continued)

- b) The Department may also release a lien when:
 - 1) It receives the value of the property to which the lien attaches, but its claim for any balance due on the lien is reserved against any of the recipient's subsequently discovered assets; or
 - 2) The recipient has a dependent spouse and minor children; or
 - 3) Rehabilitative training for employment or other means of self-support is feasible where release of the lien would facilitate achievement of self-support status and prevent or reduce the likelihood of a return to dependency on public assistance.

(Source: Amended at 17 Ill. Reg. _____, effective _____)

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

- 1) Heading of the Part: Income Tax
- 2) Code Citation: 86 Ill. Adm. Code 100
- 3) Section Numbers: Proposed Action:
100.5020 Amendment
100.5140 Amendment
100.5230 Amendment
100.5250 Amendment
100.7095 Amendment
100.7310 Amendment
100.9000 Amendment
100.9100 Amendment
100.9400 Amendment
100.9420 Amendment
- 4) Statutory Authority: Implementing the Illinois Income Tax Act (Ill. Rev. Stat. 1991, ch. 120, par. 1-101 et seq.) [35 ILCS 5/101 et seq.] and the Uniform Penalty and Interest Act (Ill. Rev. Stat. 1991, ch. 120, par. 2603-1 et seq.) [35 ILCS 735/3-1 et seq.]
- 5) A. Complete Description of the Subjects and Issues Involved: This rulemaking amends the Department's rules concerning the Illinois Income Tax Act to include references to the Uniform Penalty and Interest Act ("the UPIA"). The Uniform Penalty and Interest Act is effective January 1, 1994. In a separate rulemaking in this edition of the Illinois Register the Department has proposed a new Part (86 Ill. Adm. Code 700) that provides detailed rules on the new UPIA. These amendments to the Income tax rules cross-reference the new Act and the new rules as appropriate.
- 6) Will this proposed rule replace an emergency rule currently in effect:
No
- 7) Does this rulemaking contain an automatic repeal date? No
- 8) Does this proposed amendment contain incorporations by reference? No
- 9) Are there any other proposed amendments pending on this Part: Yes.

Section Numbers	Proposed Action	IL Register Citation
100.9005	Amendment	5/14/93, 17 Ill. Reg. 6945
100.3700	Amendment	7/2/93, 17 Ill. Reg. 9870
100.3750	New Section	7/2/93, 17 Ill. Reg. 9870

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

- 10) Statement of Statewide Policy Objectives: This rulemaking does not create a state mandate, nor does it modify any existing state mandates.
- 11) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Persons who wish to submit comments on this proposed rule may submit them in writing by no later than 45 days after publication of this notice to:

Keith W. Staats
Staff Attorney
Illinois Department of Revenue
Legal Services Bureau
101 West Jefferson
Springfield, Illinois 62708
Phone: (217) 782-7054
- 12) Initial Regulatory Flexibility Analysis:
A) Types of small businesses affected: Any small business subject to the Illinois Income Tax Act.
B) Reporting, bookkeeping or other procedures required for compliance: No new reporting, bookkeeping or other procedures are required for compliance.
C) Types of professional skills necessary for compliance: No additional skills are needed for compliance.

The full text of the Proposed Amendment(s) begins on the next page:

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

TITLE 86: REVENUE
CHAPTER I: DEPARTMENT OF REVENUEPART 100
INCOME TAX

SUBPART A: TAX IMPOSED

Section
100.2000
100.2050

Introduction
Net Income (IITA Section 202)

SUBPART B: CREDITS

Section
100.2100

Investment Credit

SUBPART C: NET OPERATING LOSSES OF UNITARY BUSINESS GROUPS
OCCURRING PRIOR TO DECEMBER 31, 1986

Section
100.2200

Net Operating Losses Occurring Prior to December 31, 1986, of
Unitary Business Groups: Treatment by Members of the Unitary
Business Group (IITA Section 202) - Scope

100.2210

Net Operating Losses Occurring Prior to December 31, 1986, of
Unitary Business Groups: Treatment by Members of the Unitary
Business Group: (IITA Section 202) - Definitions

100.2220

Net Operating Losses Occurring Prior to December 31, 1986, of
Unitary Business Groups: Treatment by Members of the Unitary
Business Group: (IITA Section 202) - Current Net Operating
Losses; Offsets Between Members

100.2230

Net Operating Losses Occurring Prior to December 31, 1986, of
Unitary Business Groups: Treatment by Members of the Unitary
Business Group: (IITA Section 202) - Carrybacks and
Carryforwards

100.2240

Net Operating Losses Occurring Prior to December 31, 1986, of
Unitary Business Groups: Treatment by Members of the Unitary
Business Group: (IITA Section 202) - Effect of Combined Net
Operating Loss in Computing Illinois Base Income

100.2250

Net Operating Losses Occurring Prior to December 31, 1986, of
Unitary Business Groups: Treatment by Members of the Unitary
Business Group: (IITA Section 202) - Deadline for Filing Claims
Based on Net Operating Losses Carried Back From a Combined
Apportionment Year

SUBPART D: ILLINOIS NET LOSS DEDUCTIONS OCCURRING ON OR
AFTER DECEMBER 31, 1986

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

Section
100.2300

Illinois Net Loss Deductions for Losses Occurring On or After
December 31, 1986

100.2310

Computation of the Illinois Net Loss Deduction

100.2320

Determination of the Amount of Illinois Net Loss

100.2330

Illinois Net Loss Carrybacks and Net Loss Carryovers

100.2340

Illinois Net Loss Deductions of Corporations That are Members of
a Unitary Business Group: Separate Unitary Versus Combined
Unitary Returns

100.2350

Illinois Net Loss Deductions of Corporations that are Members of
a Unitary Business Group: Changes in Membership

SUBPART G: BASE INCOME OF TRUSTS AND ESTATES

Section
100.2680

Capital Gain Income of Estates and Trusts Paid to or Permanently
Set Aside for Charity

SUBPART I: GENERAL RULES OF ALLOCATION AND APPORTIONMENT
OF BASE INCOME

Section
100.3000
100.3010
100.3020

Terms Used in Article 3 (IITA Section 301)
Business and Nonbusiness Income (IITA Section 301)
Resident (IITA Section 301)

SUBPART J: COMPENSATION PAID TO NONRESIDENTS

Section
100.3100
100.3110
100.3120

Compensation (IITA Section 302)
State (IITA Section 302)
Allocation of Compensation Paid to Non-Residents (IITA Section
302)

SUBPART K: NON-BUSINESS INCOME OF PERSONS OTHER THAN
RESIDENTS

Section
100.3200
100.3210
100.3220

Taxability in Other State (IITA Section 303)
Commercial Domicile (IITA Section 303)
Allocation of Certain Items of Nonbusiness Income by Persons
Other than Residents (IITA Section 303)

SUBPART L: BUSINESS INCOME OF PERSONS OTHER THAN RESIDENTS

Section
100.3300

Allocation and Apportionment of Base Income (IITA Section 304)

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

100.3310	Business Income of Persons Other than Residents (IITA Section 304) - In General
100.3320	Business Income of Persons Other Than Residents (IITA Section 304) - Apportionment
100.3330	Business Income of Persons Other Than Residents (IITA Section 304) - Allocation
100.3340	Business Income of Persons Other Than Residents (IITA Section 304)
100.3350	Property Factor (IITA Section 304)
100.3360	Payroll Factor (IITA Section 304)
100.3370	Sales Factor (IITA Section 304)
100.3380	Special Rules (IITA Section 304)

SUBPART N: TIME AND PLACE FOR FILING RETURNS

Section	Time for Filing Returns: Individuals (IITA Section 505)
100.5000	Place for Filing Returns: All Taxpayers (IITA Section 505)
100.5010	Extensions of Time for Filing Returns: All Taxpayers (IITA Section 505)
100.5020	Taxpayer's Notification to the Department of Certain Federal Changes Arising in Federal Consolidated Return years, and Arising in Certain Loss Carryback Years (IITA Section 506)
100.5030	

SUBPART O: COMPOSITE RETURNS

Section	Composite Returns: Eligibility
100.5100	Composite Returns: Responsibilities of Authorized Agent
100.5110	Composite Returns: Individual Liability
100.5120	Composite Returns: Required forms and computation of Income
100.5130	Composite Returns: Estimated Payments
100.5140	Composite Returns: Tax, Penalties and Interest
100.5150	Composite Returns: Credit for Resident Individuals
100.5160	Composite Returns: Definition of a "Lloyd's Plan of Operation"
100.5170	

SUBPART P: COMBINED RETURNS

Section	Election to File a Combined Return
100.5200	Procedure for Making the Election
100.5210	Designated Agent for the Members
100.5220	Combined Estimated Tax Payments
100.5230	Claims for Credit of Overpayments
100.5240	Liability for Combined Tax, Penalty and Interest
100.5250	Combined Amended Returns
100.5260	Computation of Combined Income and Tax
100.5270	

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

100.5280	Definitions and Miscellaneous Provisions Relating to Combined Returns
----------	---

SUBPART Q: REQUIREMENT AND AMOUNT OF WITHHOLDING

Section	Requirement of Withholding (IITA Section 701)
100.7000	Compensation Paid in this State (IITA Section 701)
100.7010	Transacting Business Within this State (IITA Section 701)
100.7020	Payments to Residents (IITA Section 701)
100.7030	Employer Registration (IITA Section 701)
100.7040	Computation of Amount Withheld (IITA Section 701)
100.7050	Additional Withholding (IITA Section 701)
100.7060	Voluntary Withholding (IITA Section 701)
100.7070	Correction of Underwithholding or Overwithholding (IITA Section 701)
100.7080	
100.7090	Reciprocal Agreement (IITA Section 701)
100.7095	Cross References

SUBPART R: AMOUNT EXEMPT FROM WITHHOLDING

Section	Withholding Exemption (IITA Section 702)
100.7100	Withholding Exemption Certificate (IITA Section 702)
100.7110	Exempt Withholding Under Reciprocal Agreements (IITA Section 702)
100.7120	

SUBPART S: INFORMATION STATEMENT

Section	Reports for Employee (IITA Section 703)
100.7200	

SUBPART T: EMPLOYER'S RETURN AND PAYMENT OF TAX WITHHELD

Section	Returns of Income Withheld from Wages (IITA Section 704)
100.7300	Quarterly Returns Filed on an Annual Basis (IITA Section 704)
100.7310	Time for Filing Returns (IITA Section 704)
100.7320	Payment of Tax Deducted and Withheld (IITA Section 704)
100.7330	Correction of Underwithholding or Overwithholding (IITA Section 704)
100.7340	

SUBPART U: COLLECTION AUTHORITY

Section	General Income Tax Procedures (IITA Section 901)
100.9000	Collection Authority (IITA Section 901)
100.9010	

NOTICE OF PROPOSED AMENDMENTS

APPENDIX A: BUSINESS INCOME OF PERSONS OTHER THAN RESIDENTS

Table A Example of Unitary Business Apportionment
Table B Example of Unitary Business Apportionment for Groups Which Include Members Using Three-Factor and Single-Factor Formulas

AUTHORITY: Implementing the Illinois Income Tax Act (Ill. Rev. Stat. 1991, ch. 120, pars. 1-101 et seq.) [35 ILCS 5/101 et seq.] and authorized by Section 1401 of the Illinois Income Tax Act (Ill. Rev. Stat. 1991, ch. 120, par. 14-1401) [35 ILCS 5/1401].

SOURCE: Filed July 14, 1971, effective July 24, 1971; amended at 2 Ill. Reg. 49 p. 84, effective November 29, 1978; amended at 5 Ill. Reg. 813, effective January 7, 1981; amended at 5 Ill. Reg. 4617, effective April 14, 1981, amended at 5 Ill. Reg. 4642, effective April 14, 1981; amended at 5 Ill. Reg. 5537, effective May 7, 1981; amended at 5 Ill. Reg. 5705, effective May 20, 1981; amended at 5 Ill. Reg. 5883, effective May 20, 1981; amended at 5 Ill. Reg. 6843, effective June 16, 1981; amended at 5 Ill. Reg. 13244, effective November 13, 1981; amended at 5 Ill. Reg. 13724, effective November 30, 1981; amended at 6 Ill. Reg. 579, effective December 29, 1981; amended at 6 Ill. Reg. 9701, effective July 26, 1982; amended at 7 Ill. Reg. 399, effective December 28, 1982; codified at 8 Ill. Reg. 19574; amended at 9 Ill. Reg. 16986, effective October 21, 1985; amended at 9 Ill. Reg. 685, effective December 31, 1985; amended at 10 Ill. Reg. 7913, effective April 28, 1986; amended at 10 Ill. Reg. 19512, effective November 3, 1986; amended at 10 Ill. Reg. 21941, effective December 15, 1986; amended at 11 Ill. Reg. 831, effective December 24, 1986; amended at 11 Ill. Reg. 2450, effective January 20, 1987; amended at 11 Ill. Reg. 12410, effective July 8, 1987; amended at 11 Ill. Reg. 17782, effective October 16, 1987; amended at 12 Ill. Reg. 4865, effective February 25, 1988; amended at 12 Ill. Reg. 6748, effective March 25, 1988; amended at 12 Ill. Reg. 11766, effective July 1, 1988; amended at 12 Ill. Reg. 14307, effective August 29, 1988; amended at 13 Ill. Reg. 8917, effective May 30, 1989; amended at 13 Ill. Reg. 10952, effective June 26, 1989; amended at 14 Ill. Reg. 4558, effective March 8, 1990; amended at 14 Ill. Reg. 6810, effective April 19, 1990; amended at 14 Ill. Reg. 10082, effective June 7, 1990; amended at 14 Ill. Reg. 16012, effective September 17, 1990; emergency amendment at 17 Ill. Reg. 473, effective December 22, 1992, for a maximum of 150 days; amended at 17 Ill. Reg. 8869, effective June 1, 1993; amended at 17 Ill. Reg. 13776, effective August 9, 1993; recodified at 17, Ill. Reg. 14189, amended at — Ill. Reg. —, effective _____.

Section 100.5020 Extensions of Time for Filing Returns: All Taxpayers (IITA Section 505)

NOTICE OF PROPOSED AMENDMENTS

SUBPART V: NOTICE AND DEMAND

Notice and Demand (IITA Section 902)

SUBPART W: ASSESSMENT

Assessment (IITA Section 903)
Waiver of Restrictions on Assessments (IITA Section 907)

SUBPART X: DEFICIENCIES AND OVERPAYMENTS

Deficiencies and Overpayments (IITA Section 904)
Application of Tax Payments Within Unitary Business Groups (IITA Section 603)
Limitations on Notices of Deficiency (IITA Section 905)
Further Notices of Deficiency Restricted (IITA Section 906)

SUBPART Y: CREDITS AND REFUNDS

Credits and Refunds (IITA Section 909)
Limitations on Claims for Refund (IITA Section 911)
Recovery of Erroneous Refund (IITA Section 912)

SUBPART Z: INVESTIGATIONS AND HEARINGS

Access to Books and Records (IITA Section 913)
Taxpayer Representation and Practice Requirements
Conduct of Investigations and Hearings

SUBPART AA: JUDICIAL REVIEW

Administrative Review Law (IITA Section 1201)

SUBPART BB: DEFINITIONS

Unitary Business Group Defined (IITA Section 1501)

SUBPART CC: LETTER RULING PROCEDURES

Letter Ruling Procedures

DEPARTMENT OF REVENUE

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

NOTICE OF PROPOSED AMENDMENTS

- a) **Tentative Payments.** An extension of time to file a return permitted under this Section is not to be construed as an extension by the Department of the time for payment of tax due on such return.
- b) **Automatic Illinois Extensions.** The Department will grant an automatic extension of 6 months (7 months for corporations) to file any Illinois income tax return except Form IL-941. No application form need be filed by a taxpayer to obtain this extension. If a balance of tentative tax is due, the taxpayer should transmit the payment with the appropriate form (Form IL-505-1 and Form IL-505-B) by the original filing due date in order to avoid the penalty for underpayment of tax (IIITA Section 1005) and statutory interest (IIITA Section 1003).
- c) **Additional Extensions Beyond the Automatic Extension Period.** The Department will approve an extension of more than 6 months (7 months for corporations) if an extension of more than 6 months is granted by the Internal Revenue Service. For corporations the additional Illinois extension will be one month beyond any approved federal extension of longer than 6 months. For all other taxpayers, the additional extension will be for the length of time approved by the Internal Revenue Service. All taxpayers must attach a copy of the approved federal extension to their return when it is filed.

d) **Penalty and Interest on Underpayment of Tax**

- 1) **IIITA Section 1005 Penalty.** A penalty of 6% per annum on any tax underpayment shall be assessed if the amount of tax required to be shown on a return is not paid on or before the date required for filing the return (determined without regard to any extension of time to file) for returns due prior to January 1, 1994. For returns due on and after January 1, 1994, the penalty shall be determined in the manner and at the rate prescribed by the Uniform Penalty and Interest Act [35 ILCS 735/3-1 - 735/3-9] ("the UPIA") and 86 Ill. Adm. Code 700. However, (as specified in the Internal Revenue Code Regulations, 26 CFR 301.6651-1(c)(3)), no penalty will be assessed if the amount of the underpayment is 10% or less of the amount of tax required to be shown on the return and the taxpayer pays such amount due by the extended due date.
- 2) **IIITA Section 1003 Interest.** Interest at the rate of 9% per annum (or at such adjusted rate as is established under IRC Section 6621(b)) will be assessed for the period from the due date of the return to the date of payment for any

amount of tax not paid on or before the due date (determined without regard to any extension) for returns due before January 1, 1994. For returns due on and after January 1, 1994, the penalty shall be determined in the manner and at the rate prescribed by the Uniform Penalty and Interest Act [35 ILCS 735/3-1 - 735/3-9] ("the UPIA") and 86 Ill. Adm. Code 700.

e) **Late Filing Penalty**

- 1) The Department will not assess IIITA Section 1001 late filing penalty for the period of any extension provided by the IIITA and this regulation.
- 2) For returns due prior to January 1, 1994, in case of failure to file any tax return required under this act on the date prescribed therefor (determined with regard to any extensions of time for filing), unless it is shown that such failure is due to reasonable cause (as defined in Section 6651 of the Internal Revenue Code, 26 U.S.C. 6651) there shall be added as a penalty to the amount required to be shown as tax on such return 7.5% of the amount of such tax if the failure is not for more than one month, with an additional 7.5% for each additional month or fraction thereof during which such failure continues, not exceeding 37.5% in the aggregate. (Section 1001 of the IIITA, effective until January 1, 1994).

- 3) For returns due on and after January 1, 1994, in case of failure to file any tax return required under this Act on the date prescribed therefor, (determined with regard to any extensions of time for filing) there shall be added as a penalty the amount prescribed by Section 3-3 of the Uniform Penalty and Interest Act. (Section 1001 of the IIITA, effective January 1, 1994)

(Source: Amended at — III. Reg. — effective —)

Section 100.5140 Composite Returns: Estimated Payments

Estimated Payments. Estimated payments shall be made on the basis of the tax shown on the composite return. Any penalty for underpayment of estimated tax (see Section 804 of the IIITA and Section 3-3 of the UPIA) shall be determined on a composite basis. However, in no event shall such penalty be imposed for taxable years ending December 31, 1987.

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

(Source: Amended at — Ill. Reg. — effective

Section 100.5230 Combined Estimated Tax Payments

a) In general. If a combined return is filed for two consecutive taxable years, payments of estimated tax must be made on a combined basis for each subsequent taxable year, until such time as the election is revoked and separate returns are properly filed. For the taxable years in which combined estimated payments are required, the group shall be treated as one taxpayer for purposes of IITA Section 803 of the Act (relating to payment of estimated tax). If separate returns are properly filed in a year after a combined return year, the amount of any estimated tax payments made on a combined basis for such year shall be credited against the separate tax liabilities of the former electing members in the manner allocated by the designated agent which is satisfactory to the Department. The manner of allocation will be satisfactory to the Department if it does not jeopardize the collection of any liability.

b) First two combined return years. For the first two years for which a combined return is filed, payments of estimated tax may be made on either a combined or separate basis. The amount of any separate estimated tax payments made for such year shall be credited against the combined tax liability. The designated agent shall give notice, in the manner and form prescribed by the Department in the instructions to Illinois Schedule UB, of any estimated payments made on a separate basis for any such year.

c) Penalty for underpayment of estimated tax.

- 1) In general. If a combined return is filed, the amount of any penalty for underpayment of estimated tax shall be computed as if the electing members were one taxpayer.
- 2) Penalty in the first combined return year. In the first combined return year, the exceptions under IITA Section 804(b)(1) and ~~(2)(c)~~ shall be determined based on the aggregate of the tax and income shown on the returns filed for the previous year.

3) Combined payments made but separate returns filed for a tax year following a combined return year. If former electing members properly file separate returns for the taxable year, and if payments of estimated tax were made on a combined basis, the payments made shall be allocated

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

in the manner provided by subsection (a). The exceptions under IITA Section 804(b)(1) and ~~(2)(c)~~ shall be determined based on each former electing member's allocated share of tax and income from the combined return filed for the previous year. The allocated shares shall be reported to the Department by the designated agent in the manner prescribed in the instructions to Schedule UB.

4) Combined payments made but separate returns filed for a tax year not following a combined return year. If combined estimated payments are made for a tax year but no combined return is filed for that year and no combined return was filed in the previous year, the estimated tax shall be a credit only for the corporation that made the payment.

d) Change in membership.

1) Entering. If an eligible corporation becomes a member of a group during a combined-return year, for purposes of computing the exceptions under IITA Section 804, such corporation's tax, net income and facts shown on its return for the preceding taxable year shall be included with the tax, net income and facts shown on the combined return for the preceding taxable year.

2) Leaving. If an electing corporation leaves the group during a combined-return year, for purposes of computing the exceptions under IITA Section 804 for such combined-return year, the tax, net income and facts for the preceding taxable year attributable to such corporation shall be separately identified by the designated agent as if the corporation was not a member of the group for the preceding taxable year. If the designated agent fails to make correct attributions, no exceptions to the Section 804 penalty shall apply.

e) Examples. The provisions of this Section may be illustrated by the following examples:

- 1) Example. Corporations P and S-1 file a combined return for the first time for calendar year 1985. P and S-1 also file combined returns for 1986 and 1987. For 1985 and 1986, P and S-1 may make payments of estimated tax on either a separate or combined basis. For 1987, however, the group must pay its estimated tax on a combined basis. In determining whether P and S-1 come within the exception provided in IITA Section 804(d)(1) for 1985, the

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

"tax shown on the return" is the aggregate amount of tax shown on the separate returns of each member for 1984.

2) Example. Corporations X and Y filed combined returns for the calendar years 1985 and 1986 and separate returns for 1987. In determining whether X or Y comes within the exception provided in IITA Section 804(d)(2) for 1987, the "facts shown on the return" are the facts shown on the combined return for 1986 attributable to X and to Y by the designated agent.

3) Example. Assume the same facts as in example (1). Assume further that corporation S-2 becomes a member of the group on July 1, 1987, and joins in the filing of the combined return for 1987. In determining whether the group (which now includes S-2) comes within the exception provided in IITA Section 804(d)(1) for 1987, the "tax shown on the return" is the tax shown on the combined return for 1986 plus any tax of S-2 on its separate return for 1986.

4) Example. Assume the same facts as in example (1). Assume further that corporation S-2 is a member of the group during 1986, and joins in the filing of the combined return for such year, but ceases to be a member of the group on September 15, 1987. In determining whether the group (which no longer includes S-2) comes within the exception provided in IITA Section 804(d)(1) for 1987, the "tax shown on the return" is the tax shown on the combined return for 1986 less the amount attributed to S-2 by the designated agent. Likewise, with regard to S-2's return, the "tax shown on the return" is the amount attributed to S-2 by the designated agent.

(Source: Amended at — Ill. Reg. — effective

Section 100.5250 Liability for Combined Tax, Penalty and Interest

a) Joint and several liability of electing members. The taxpayers making the election shall be jointly and severally liable for the combined tax, penalty and interest computed in accordance with these combined return regulations, Sections 100.6000 through 100.6080 of this Part, as well as the Uniform Penalty and Interest Act and rules adopted pursuant to the UPIA at 86 Ill. Adm. Code 700.

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

b) Effect of intercompany agreements. No agreement entered into by one or more members of the group with any other member of such group or with any other person shall in any case have the effect of reducing the liability prescribed under this Section.

c) Penalties. If a penalty is imposed under the IITA and the UPIA with respect to a combined return, the amount shall be based on the combined tax liability or deficiency for the combined return year.

d) Interest. If interest is imposed under the IITA, at the rate determined under the UPIA, with respect to a combined return, the amount shall be based on the combined tax liability or deficiency for the combined return year.

(Source: Amended at — Ill. Reg. — effective

Section 100.7095 Cross References

See IITA Sections 1002(c) and 1002(d), the UPIA and 86 Ill. Adm. Code 700 for penalties relating to the failure to deduct and withhold a tax as required by IITA Section 701. See 86 Ill. Adm. Code 100.7120 for provisions relating to claiming exemption from withholding pursuant to a reciprocal agreement.

(Source: Amended at — Ill. Reg. — effective

Section 100.7310 Quarterly Returns Filed on Annual Basis (IITA Section 704)

a) In general. Effective January 1, 1986 (and pursuant to P.A. 84-341) if the amount of tax deducted and withheld during the calendar year will be less than \$500.00 (formerly \$100), an employer may file an annual return for the calendar year or for any period for which a return is made as a final return. No application need be made to file an annual return. The return filed for such period shall report the amount of tax deducted and withheld during the period and not previously remitted. Form IL-941 is prescribed for making the return authorized under this paragraph. An employer shall use Form W-3 to submit the information contained on the combined Form W-2, in the same manner as required under 86 Ill. Adm. Code Section 100.7300, above.

interest shall not be imposed for the period after the date of such issuance if such amount is paid within ten days.

On and after January 1, 1994, IITA Section 1003(a) provides that interest shall be paid in the manner and at the rate prescribed in Section 3-2 of the UPIA for the period from such date to the date of payment of such amount. Section 3-2(c) of the UPIA provides that if notice and demand is made for the payment of any amount of tax due and if the amount due is paid within 21 days after the date of such notice and demand, interest on the amount so paid shall not be imposed for the period after the date of the notice and demand. ~~The income tax is principally collected through withholding at the source or by payments of estimated tax required by law to be filed by certain individual and corporate taxpayers. Neither withholding nor payment of estimated tax relieves a taxpayer from the duty of filing an income tax return otherwise required.~~

b) Examination and determination of tax liability.

1) Filing and examination of return. After the income tax returns are filed with the Department, they are sorted, classified, and processed (which includes inspection of the return to verify the accuracy of the tax and supporting computations therein). Errors apparent in the return are corrected (see 86 Ill. Adm. Code Section 100.9200(a)(2), below) and notification of the error and the corrections are sent to the taxpayer. Thereafter, many of these returns are selected for examination which may be conducted by correspondence, office audit, or field audit. If, after examination, the return is accepted as filed, the taxpayer is notified by appropriate "no change" letter or report. If, as a result of examination, adjustments are proposed increasing the amount of the tax liability shown on the return or (with or without a claim for refund) decreasing it, and the taxpayer agrees in whole or in part with such adjustments, he may be requested to execute Illinois Form IL-870, waiving the restrictions on assessment and collection, and enabling immediate assessment upon acceptance by the Department after appropriate review of the examiner's (Revenue Auditor's) report. If adjustments are proposed with which the taxpayer does not agree, he ordinarily is afforded certain administrative appeal rights as described below which, however, do not apply in any case where criminal prosecution is under consideration or, in the discretion of the Director, the state's interest thereby would be prejudiced. Nor is appropriate action otherwise

b) Duration of annual filing status. Authority to file a return pursuant to this Section shall remain in effect until that time during any calendar year when the amount of tax deducted and withheld equals or exceeds \$500.00. When during any such calendar year the amount deducted and withheld equals or exceeds \$500.00, an employer must file a quarterly return, as required under 86 Ill. Adm. Code Section 100.7300(a) above, for the quarter in which such event occurs and for all subsequent quarters until permission pursuant to paragraph subsection (a) of this Section is again granted. If at any time during the calendar year an employer is required to file a quarterly return pursuant to the preceding sentence, the permission granted under paragraph subsection (a) of this Section will not be granted again until the following calendar year.

c) Cross reference. See IITA Sections 1002(c) and 1002(d), the UPIA and 86 Ill. Adm. Code 700 for penalties for failure to file a return and remit the tax required by this Act.

(Source: Amended at — III. Reg. —, effective

Section 100.9000 General Income Tax Procedures (IITA Section 901)

a) Collection procedure. The Illinois income tax system basically is one of self-assessment. In general, each person or taxpayer liable for tax is required to file a prescribed form of return showing the facts upon which tax liability may be determined and assessed; the taxpayer is required to compute the tax due on the return and make payment thereof on or before the due date for filing the return. If the taxpayer fails to pay all or any part of the tax when due, the Director, after assessment, issues to each person liable for any unpaid portion thereof, a notice and demand for payment at the place and time stated in the notice. The income tax is principally collected through withholding at the source or by payments of estimated tax required by law to be filed by certain individual and corporate taxpayers. Neither withholding nor payment of estimated tax relieves a taxpayer from the duty of filing an income tax return otherwise required.

1) Prior to January 1, 1994, IITA Section 1003(a) provides that interest at the rate of 9% per annum (or at such adjusted rate as is established under Section 6621(b) of the Internal Revenue Code) shall be paid on unpaid amounts of tax imposed by the Act from the due date to the date paid; however, subsection (e) thereunder provides that, if a notice and demand for payment of an amount due is issued,

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

precluded where the assessment or collection of the tax is in jeopardy (see Section 1102 of the Illinois Income Tax Act).

- 2) Office conference with Department auditor and his supervisor. A taxpayer initiates the administrative appeal rights advertised to in paragraph (b)(1) above by requesting, after the Department has proposed adjustments, in office conference to be attended by either himself or his representative (or both), the auditor, and the auditor's supervisor or other designee; the request may be by telephone or in writing. Written objections to the adjustments proposed are not required. The objectives of the office conference are to provide taxpayers an opportunity by discussion and further consideration to reach an early agreement respecting disputed items arising from the examination and to assure to the extent possible that all available pertinent facts, contentions, and viewpoints are included in the file and taken into account in the formulation of recommendations. Further objectives are to insure that the Act provisions as interpreted by regulations and rulings are properly applied and that the recommendations are consistent with any Department positions thereunder, as well as to provide a full explanation to the taxpayer and to reflect in the case file the findings and conclusions reached and the reasons therefor. If as a result of the office conference adjustments are proposed with which the taxpayer agrees in whole or part, he again ordinarily will be requested to execute the aforementioned Form IL-870 subject to the Department's review and acceptance; see 86 Ill. Adm. Code 100.9220(a) for the effect such execution has on the running of interest.

- 3) Audit Review; Issuance of Notice of Deficiency. If, after the office conference, the taxpayer does not agree with the proposed adjustments, the administrative case file will then be submitted to the Department's audit review staff for technical and arithmetic review. After such review, the Audit Review staff will issue a Notice of Deficiency pursuant to IITA 904(c) for any unagreed or disputed amounts. Notices of Deficiency, although to be prepared and issued by Audit Review, due to being in the nature of pleadings, shall be subject to review before issuance by the Income Tax Legal Division.

- c) Protest Procedures. Pursuant to IITA Sections 904(d) and 908(a) a taxpayer may protest the Notice of Deficiency by requesting a hearing before the Department. The taxpayer has 45 60 days (150

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

days if the taxpayer is outside the United States) after the issuance of a Notice of Deficiency to submit a proper protest to the Audit Review Division. Failure to properly protest the Notice of Deficiency within the 45 60 (150) day period results in the automatic assessment of the tax, and penalty shown therein. See 86 Ill. Adm. Code 200.120 for protest requirements. Upon receiving a timely protest to the adjustments proposed in the examiner's report, the administrative case file will be forwarded to the Department's Income Tax Legal Division.

- d) Hearings. Department Hearings shall be conducted in accordance with the regulations provided at 86 Ill. Adm. Code 200, "Practice and Procedure for Hearings Before the Illinois Department of Revenue".

(Source: Amended at — Ill. Reg. — effective _____)

Section 100.9100 Notice and Demand (IITA Section 902)

a) In general.

- 1) Notice required. Except as provided in subsection paragraph (b) below of this section, the Director or his delegate shall issue written notice and demand for payment for any unpaid portion of taxes, penalties, and interest imposed by the Act as soon as practicable after an amount payable thereunder has been deemed assessed. The written notice (see IITA Section 1402) shall be given to the person or persons liable for the unpaid amount and shall state a time and place for payment. (Effective for taxable years ending after December 30, 1973, the written notice shall be sent by first class mail or left at the person's (or persons') usual place of business.)

- 2) Tax shown as due on returns. IITA Section 601(a) requires that a taxpayer pay (without notice or demand) the amount of tax shown on a return which remains unpaid after taking into account certain amounts enumerated in IITA Section 601(b).

- 3) Self-assessment; mathematical errors. IITA Sections 903(a)(1) and (4) provides that the amount of tax shown due on a return or on an amended return increasing the tax shall be deemed assessed as of the date the return is filed but that, irrespective of other provisions, any amount paid as tax or in respect of tax paid under the Act other than amounts

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

withheld or paid as estimated tax under Articles 7 or 8 shall be deemed assessed upon the date of receipt of payments. If as a result of a mathematical error the amount of tax shown on a return or on such amended return is understated, the Department is to notify the taxpayer that the portion of the correct amount of tax in excess of that shown on the return has been (deemed) assessed is due. Also, thereunder, the tax computed by the Department on a return properly filed without the tax computation is to be deemed assessed as of the date when payment is due.

4) Notice of deficiency as prerequisite to assessment. Inasmuch as the tax deemed assessed in each of the above instances is based on the facts reported in the return or amended return filed by the taxpayer, any notice and demand issued to effect immediate collection of the tax remaining unpaid in connection therewith is not considered to be a notice of deficiency as that term is used in IITA Section 903(a)(2). However, a notice of deficiency is a prerequisite for assessment if the taxpayer fails to file a tax return and under the authorization in IITA Section 904(b) the Department determines the amount of tax and penalties due according to its best judgment and information.

5) Interest.

A) Prior to January 1, 1994, IITA Section 1003(a) and (e) provides that interest at the rate of 9% per annum (or at such adjusted rate as is established under Section 6621(b) of the Internal Revenue Code), is to be paid on any amount of tax imposed by the Act not paid on or before the date prescribed for payment thereof except that, if paid within 10 days of the date of issuance of notice and demand therefor, interest is not to be imposed for the period after the notice and demand issuance date. Interest begins with the date of issuance of the notice and demand not paid within the 10-day period. (See IITA Sections 601(a) and 1003)

B) On and after January 1, 1994, IITA Section 1003(a) provides that interest shall be paid in the manner and at the rate prescribed in Section 3-2 of the UPIA for the period from such date to the date of payment of such amount. Section 3-2(c) of the UPIA provides that if notice and demand is made for the payment of any amount of tax due and if the amount due is

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

paid within 21 days after the date of such notice and demand, interest on the amount so paid shall not be imposed for the period after the date of the notice and demand.

b) Judicial review.

1) In general. If a notice of deficiency has been issued and deemed assessed under IITA Section 903(a)(2) and the person (or persons) liable for the tax has filed a timely protest under IITA Section 908, notice and demand respecting such assessment shall not be made until all proceedings in court for review of the assessment have terminated or the time for taking thereof has expired without such proceedings being instituted.

2) Protest of notice of deficiency. IITA Section 908 provides that after a notice of deficiency is issued the taxpayer may file a protest against it within 45 60 days (150 days if the taxpayer is outside the United States). The Department's action on the protest, if no hearing was requested, becomes final 30 days after the mailing of a notice of decision. If a hearing was requested, the Department's action becomes final 30 days after the mailing of a notice of decision unless a rehearing is requested within that 30-day period. If, within that 30-day period, the taxpayer requests a rehearing on the decision, the Department's action becomes final either upon its issuance (within 10 days after the rehearing request is received) or a denial of the request or, if such denial is not issued within that 10-day period, upon the Department's issuance (as soon as practicable) of a notice of final decision. (See 86 Ill. Adm. Code 100.9200 and 100.9100-)

3) Administrative Review of decisions. IITA Section 1201 states that the provisions of the Administrative Review Act and rules adopted pursuant thereto shall apply to and govern all proceedings for the judicial review of the Department's final actions under IITA Sections 908(d) and 910(d). Section 4 of that Act states that every action to review a final administrative decision shall be commenced by the filing of a complaint and the issuance of summons within 35 days from the date of service on the party affected of a copy of the decision sought to be reviewed.

c) Action for recovery of taxes.

DEPARTMENT OF REVENUE

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

NOTICE OF PROPOSED AMENDMENTS

- 1) In general. The Department, at any time that levy proceedings may be timely commenced under IITA Section 1109, regardless of whether a notice of lien was filed under the provisions of Section 1103 may bring an action in any court of competent jurisdiction within or without this state to recover the amount of unpaid taxes, penalties, and interest due under the Act. For purposes of such action, certification by the Department of the correctness of the amount of any deficiency, its assessment, and of its procedural compliance with all provisions of the Act shall constitute prima facie evidence of such correctness, assessment, and procedural compliance.
- 2) Levy and sale authorized. If tax due under the Act remains unpaid for 10 days after issuance of a notice and demand for payment and no review proceedings have been commenced, then under IITA Section 1109, the Department may institute levy and sale proceedings against real and personal property of the taxpayer within 20 years of the filing (under IITA Section 1103) of a notice of lien.
- 3) Liens. Under IITA Sections 1102 and 1103, the Department may file a notice of regular lien or jeopardy assessment lien respecting the amount due of unpaid tax and penalty (plus interest due and unpaid at the time the notice of lien is filed) in the office of the Recorder of Deeds in the county in which the property (real or personal) subject to the lien is located. If title to land to be affected by the lien notice is registered under the May 1, 1897 Act concerning land titles mentioned in IITA Section 1103, the notice is to be filed in the office of the Registrar of Titles of the county in which the property subject to the lien is situated. (See also IITA Section 1109.)

(Source: Amended at — Ill. Reg. — effective

Section 100.9400 Credits and Refunds (IITA Section 909)

- a) In general. The Department may credit the amount of any overpayment including interest allowed thereon against any liability for tax imposed under the IITA or any other Act administered by the Department on the person who made the overpayment, and it shall refund the balance to such person. (See Section 39e of the Civil Adm. Code of Illinois, Ill. Rev. Stat. 1991-1989, ch. 127 par. 39e) [20 ILCS 2502/39e].

- b) Credit against estimated tax. An individual or corporate taxpayer by filing a return for the taxable year using the appropriate form and checking the appropriate box thereon in accord with the instructions shall have the amount of any overpayment or portion thereof credited thereafter against his estimated tax liability for the next succeeding taxable year.

c) Interest on overpayments

- 1) General rule. Subject to the provisions of this paragraph interest shall be allowed and paid upon any overpayment in respect of the tax imposed by the Act at a rate determined by reference to IITA Section 909(c). Where there is a dispute between a taxpayer and the Department regarding the amount of interest that is due, see 86 Ill. Adm. Code 100.9400(f)(6).
- 2) Overpayments. The overpayment in respect of any tax imposed by the Act includes any penalties assessed under IITA Section 1002(e), and any interest assessed on tax or on penalty under IITA Section 1003. For this purpose, an overpayment is any creditable or refundable portion of taxes, penalty, or interest which was previously paid.

3) Date of overpayment

- A) The date of overpayment is the date of payment of any tax which thereafter becomes or is determined to be refundable or creditable for the taxable year, except as provided in subsection (B). There can be no overpayment of tax prior to the last prescribed for filing the return, nor until the entire tax liability for the taxable year is satisfied, nor until the return is filed for the taxable year. Therefore, the date or dates of overpayment are the date of payment of the first amount which (when added to previous payments) exceeds the tax liability (including any interest or penalties) for the taxable year and the date or dates of any subsequent payment(s) made with respect to such tax liability, which in any event cannot be earlier than the last day prescribed for filing the return for the year, nor earlier than the date the return is filed. The "last day prescribed for filing the return" for purposes of this subsection and subsection (d) is the original due date, not the extended due date, if any.

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

B) In the case of a federal change due to the final allowance of a carryback from a loss year ending prior to December 31, 1986, under the provisions of the federal Internal Revenue Code, the date of overpayment shall be as of the close of the taxable year in which the deduction, losses, or other item or event occurred which created the federal carryback, or the date when the return for the carryback year is filed, whichever is later.

C) In the case of a federal change due to the final allowance of a carryback or carryforward from a loss year ending on or after December 31, 1986, and in the case of an Illinois change due to the carryforward or carryback of an Illinois net loss, Illinois investment credit, jobs credit, replacement tax credit, or other credit (other than estimated or tentative tax credit) from a loss or credit year ending on or after December 31, 1986, the date of the overpayment shall be the date the claim for refund is filed, except that if any overpayment is refunded within 3 months of the date the claim for refund is filed, determined without regard to processing by the Comptroller, no interest shall be allowed on such overpayment.

D) Beginning January 1, 1994, if a claim for refund relates to an overpayment attributable to a net loss carryback as provided by Section 207 of the Illinois Income Tax Act, the date of overpayment shall be the last day of the taxable year in which the loss was incurred. (see Section 3-2(d) of the Uniform Penalty and Interest Act)

d) Period for which interest is allowable

1) In general,

A) Prior to January 1, 1994, interest shall be allowed and paid from the date of overpayment to a date determined by the Director or his delegate, which shall not be more than 30 days prior to the date of any refund or credit. However, no interest shall be allowed on the amount of tax overpaid if such amount is refunded or credited within the later of three months after the last date prescribed for filing the return of such tax or within three months after the return was filed, determined without regard to processing by the Comptroller.

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

B) On and after January 1, 1994 interest shall be allowed and paid in the manner prescribed under the UPIA.

2) Estimated tax for succeeding year. Notwithstanding any other provision of this section, if a taxpayer elects on his return for the taxable year to have all or part of any overpayment shown on such return applied as an estimated tax payment for the succeeding taxable year, no interest shall be allowed on such portion of the overpayment so credited and such amount shall be applied as a payment on account of the estimated tax for such succeeding year or the installments thereof.

Examples. ~~86 Ill. Adm. Code 100-9.110 (e) through (d)~~ This Section may be illustrated by the following examples:

e) 1) Example 1: T, a calendar year taxpayer, receives an extension to June 30, 1972, to file his 1971 return. On April 15, 1972, T files an tentative return pursuant to ITA Section 602(a) showing an estimated liability of \$500 which has been paid through withholding, estimated tax payments, or as a payment with the tentative return of the tax properly estimated to be due. On June 15, 1972, T files his 1971 return showing a tax liability of \$3,000 including interest for late payment and remits \$2,500 which in addition to the \$500 paid as indicated satisfies the liability shown on his return. On August 15, 1972, T files a claim for refund for \$1,500 as a overpayment of 1971 tax. The date of overpayment for the computation of any interest thereon would be June 15 which is the date when payments first exceeded his liability as now when as a result of his claim for refund, and which is the date when the return for the taxable year was first filed. See example 2 for application for the 3 month rule.

2) Example 2: Assume the same facts as in Example (1) and that T's refund claim of \$1,500 was allowed and paid on September 1. No interest would be allowed because the refund was made of June 15, the date the final return for the taxable year was filed. If the refund was made on October 1, interest would be allowed from June 15 to a date which would be not more than 30 days prior to October 1.

3) Example 3: W, a calendar year taxpayer, files his return on March 7 and claims a refund as a result of excess withholding. The refund is made July 1. No interest would be allowed for the refund was made within 3

ILLINOIS REGISTER

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

months after April 15, which is the later of the last day prescribed for filing the return or the date the return was filed. If with the same facts the refund is made July 28, interest would be allowed from April 15 (the date of overpayment).

Example 4: X, a calendar year corporation, sustains a federal net operating loss in 1973. X files a federal claim for refund, carrying the loss back to 1970 and receives a refund of federal taxes for 1970 based on the net operating loss carryback. (Refer to subsection (f)(4), below respecting a federal application for tentative carryback adjustment.) X then files Form IL-1120X claiming an overpayment of 1970 Illinois tax as a result of a federal change in its reported taxable income for 1970. The date of overpayment would be December 31, 1973, the close of the taxable year in which the federal net operating loss occurred (provided an original 1970 IL-1120 had been filed by this date).

f) Refund claim

1) In general, A claim for refund of an overpayment of income tax may be filed with the Department only if a return for the taxable year for which the refund is claimed has been filed. Although a timely return may have the effect of a claim for refund of tax over payment (due to excess withholding or payment under Articles 7 or 8 of the Act) it does not constitute a claim for refund under IITA Section 909(d) and (e) of the Act calling for consideration. A separate claim shall be filed for each taxable year for which an income tax overpayment was made. Every claim for refund shall be in writing, shall be on the appropriate form prescribed by the Department, and (using attachments if necessary) shall state the specific grounds upon which it is founded.

2) Evidence of claim filing. In preparing and filing a claim on either an amended return before the return due date, or after such date has passed on Form IL-843, Form IL-1040X, or Form IL-1120X, a taxpayer may attach two photocopies of page 1 of the original executed claim being filed as a pro forma claim receipt form identifying the claim with a written requirement that one photocopy be returned to the claimant as a receipt. Upon the Department's receiving the claim and the two photocopies of page 1 thereof if attached, the Director's designee shall place there on the Department's Date Received Stamp and sign in ink his initials therein, after which one photocopy shall be removed

ILLINOIS REGISTER

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

an mailed to the claimant for his use as a receipt. In absence of a photocopy of the claim form (so stamped and initialed) being attached to the original claim or being produced by the claimant, copies of the Department's records certified true by the Director or his designee shall be deemed prima facie correct to show whether or not a claim was filed and if so the date upon which it was received by the Department. Furthermore, the Department's records as to the date that the claim was date received in the Department's mail room shall be prima facie evidence that the postmark date on the claim was ten days prior to that date.

3)

Amended return as claim; limited use. In an instance where a return for the taxable year is filed early, the latest received by the Department of any further return or amended return filed by the taxpayer on or before the last day prescribed for timely filing shall constitute and be accepted as his return for the taxable year. Therefore, if a return showing a tax liability for the taxable year has been filed with the Department and the tax paid and the due date prescribed for filing that return has not passed, any claim for refund filed prior to that date shall be made by the filing of a further return marked "CORRECTED", showing the amount of the tax overpayment to be refundable. Form IL-1040X and Form IL-1120X shall be used for this purpose by individuals and corporations.

4)

Claim form; federal change. If, on the other hand, the due date for filing a return has passed and under the Act an overpayment based on a federal change has arisen, in addition to meeting the requirements of IITA Section 506 a claim for refund based on such change should be made by the filing (following the instructions thereon) of a notice of such change on Illinois Form IL-843, Form IL-1040X, or Form IL-1120X, as appropriate. To meet the requirements of IITA Section 909(d) for stating specific grounds, there should be within the Form or on an attachment an explanation in detail sufficient to show the nature of the items of change or alteration. If helpful or otherwise appropriate to show the grounds and to compute the amount claimed as refundable, another return marked "AMENDED" may be attached or filed in connection with the Form IL-843. Further, where a claim for refund is filed based on a federal change giving rise to an overpayment, documentation in form of the original federal documents or correspondence furnished the taxpayer or other satisfactory proof in connection with the change (or true and correct

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

fully legible photocopies thereof) shall be attached evidencing that such federal change, represents an agreed to or final Federal Internal Revenue Service (or court imposed) acceptance, recomputation, redetermination, change, tentative carryback adjustment or settlement; and it shall be stated or shown that no contest thereof is pending. In this connection, the payment received as the result of the filing of an application for a tentative carryback adjustment (on Form 1045 or Form 1139) pursuant to 26 U.S.C. 6411 is a change reportable under IITA Section 506. A claim for refund of an overpayment of Illinois income tax occasioned by the payment of a tentative carryback adjustment may be filed on Form IL-1040X and Form IL-1120X. A premature or incomplete claim on Form IL-843, Form-1040X, or Form IL-1120X shall not constitute a claim for refund within the meaning of IITA Section 909(d), nor the purposes of commencing the 6-month period in subsection (g) below. Upon any claim being received an identified as premature, incomplete, or otherwise defective under the Act, the Department as soon as practicable shall notify the taxpayer thereof in writing to enable if possible the timely submission of a mature and perfected claim.

5) Claim form; no federal change. If a return showing tax due for the taxable year has been filed and the tax paid and an overpayment based on a purely Illinois change has arisen and not based to any extent on a change in federal income tax liability, any claim for refund should be made by the filing (following the instructions thereon) of Illinois Form IL-843, Form IL-1040X (individuals), or Form IL-1120X (corporations), as appropriate, using if necessary an attachment to set forth in detail each specific ground for refund, and if appropriate another return marked "AMENDED" may be attached to or filed in connection with the Form IL-843. Pertaining to purely Illinois changes, Forms IL-843, IL-1040X and IL-1120X are designed for use not only to claim a refund of tax overpayment but also to report an increase in the amount of previously reported or determined income tax liability for the taxable year.

6) Informal claim not permitted; disputes regarding the amount of interest due. In all cases where the original return due date has passed, claims for refund shall be filed using the following forms, as appropriate: Form IL-843, Form IL-1040X and Form IL-1120X. These forms may also be used by taxpayers to claim additional interest where there is a dispute regarding the amount of interest that is due from the Department relative to a refund. Such claims for

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

additional interest must be filed either within the 60 45-day protest period for claim denials (see IITA Section 910) or within the limitations period for filing claims for refund for the taxable year for which the interest is due (see IITA Section 911). See 86 Ill. Adm. Code 200.120 for procedure on protest. An "informal claim" such as a letter from the taxpayer, is insufficient for the purpose of establishing or extending any of the limitations in IITA Section 911 or in subsections (g) and (h) of this section.

g) Notices of refund or denial

1) In general. The Department shall examine a claim for refund, in connection as appropriate with the return for the taxable year to which it relates, as soon as practicable after it is filed to determine the correct amount of tax and the amount of any refundable overpayment to which the claimant-taxpayer may be entitled. If for the taxable year involved the Department finds the claimant entitled to a refund in any amount, it shall issue an appropriate notice of refund, abatement, or credit (see paragraph (b)). If the Department has failed to approve or deny the claim before the expiration of 6 months from the date the claim was filed, the claimant may nevertheless thereafter file with the Department a written protest addressed in accordance with the instructions in the applicable claim form (IL-1040-X, IL-1120-X, or IL-843). If a protest is filed, the Department shall consider the claim and, if the taxpayer has so requested, shall grant the taxpayer or the taxpayer's authorized representative a hearing within 6 months after the date such request is filed.

2) Notice of denial; notice of deficiency as denial. However, if the Department finds that the claim for refund is not allowable and proposes to issue a notice of denial or if taking into account the claim nevertheless finds adjustments which are a basis for proposing an increase in the amount of tax liability over that shown on the return, or decreasing the amount less than that claimed as refundable, the Department shall issue a notice of deficiency under IITA Section 904(c) (see 86 Ill. Adm. Code 100.9300(a)) or it shall issue a notice of denial or partial denial of the claim. In the event that a notice of deficiency is issued which indicates that the claim for refund was considered, such notice (of deficiency) shall constitute (concurrently) a notice of denial of the claim. Note that, in the absence of a written protest (of the notice of deficiency or denial) so issued (see 86 Ill. Adm. Code 200.120(b)), the Department's

ILLINOIS REGISTER

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

final action thereunder is not an administrative decision subject to judicial review (except as to jurisdictional questions) under the provisions of the Administrative Review Act (see 86 Ill. Adm. Code 100.9600).

- h) Effect of denial. Denial of a claim becomes final 60 45 days thereafter (irrespective of whether the claimant is outside the United States) except to the extent (in whole or part) that the claimant in the meantime shall have filed a protest, as provided by IITA Section 910 (see 86 Ill. Adm. Code 200.120(b)), against the denial of amounts claimed as refundable. In the absence of a written protest of the denial of the claim for refund, the Department's final action thereunder is not an administrative decision subject to judicial review (except as to jurisdictional questions) under the provisions of the Code of Civil Procedure (see 86 Ill. Adm. Code 100.9600).

- i) Time for protest. If after a claim for refund is denied by issuance of a written notice of denial (see 86 Ill. Adm. Code 100.9400(g)(2)) a written protest against such denial is filed by the taxpayer within 6045 days thereafter (irrespective of whether the taxpayer is outside the United States), the Department shall reconsider the denial and, if requested, shall grant the taxpayer or his authorized representative a hearing, as provided for in IITA Section 914. See 86 Ill. Adm. Code 200 for protest and hearing procedures.

(Source: Amended at — Ill. Reg. — effective

Section 100.9420 Recovery of Erroneous Refund (IITA Section 912)

- a) An erroneous refund shall be considered a deficiency of tax on the date made, and shall be deemed assessed and shall be collected as provided in IITA Sections 903 and 904 (see 86 Ill. Adm. Code 100.9200, 100.9300 and 100.9320(g)).

- b) Prior to January 1, 1994, IITA Section 1003(f) provides that any portion of the tax imposed by the Act or any interest or penalty which has been erroneously refunded and which is recoverable by the Department shall bear interest at the rate of 9% per annum (or at such adjusted rate as is established under Section 6621(b) of the Internal Revenue Code) from the date of payment of such refund.

- c) Effective January 1, 1994, Section 3-2(e) of the Uniform Penalty and Interest Act provides that, only portion of the tax imposed by

ILLINOIS REGISTER

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

an Act to which this Act is applicable or any interest or penalty which has been erroneously refunded and which is recoverable by the Department shall bear interest from the date of payment of the refund. However, no interest will be charged if the erroneous refund is for an amount less than \$500 and is due to a mistake of the Department.

(Source: Amended at — Ill. Reg. — effective

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

1) Heading of the Part: Retailers' Occupation Tax2) Code Citation: 86 Ill. Adm. Code 1303) Section Numbers: Proposed Action:130.901 Amendment
130.905 Amendment4) Statutory Authority: Implementing the Retailers' Occupation Tax Act (Ill. Rev. Stat. 1991, ch. 120, par. 440 et seq.) [35 ILCS 120/1 et seq.] and the Uniform Penalty and Interest Act (Ill. Rev. Stat. 1991, ch. 120, par. 2603-1 et seq.) [35 ILCS 735/3-1 et seq.]5) A Complete Description of the Subjects and Issues Involved: This rulemaking amends the Department's rules concerning the Retailers' Occupation Tax Act to include references to the Uniform Penalty and Interest Act ("the UPIA"). The Uniform Penalty and Interest Act is effective January 1, 1994. In a separate rulemaking in this edition of the Illinois Register, the Department has proposed a new Part (86 Ill. Adm. Code 700) that provides detailed rules on the new UPIA. These amendments to the Retailers' Occupation Tax Act rules cross-reference the new Act and the new rules as appropriate.6) Will this proposed rule replace an emergency rule currently in effect:
No7) Does this rulemaking contain an automatic repeal date? No8) Does this proposed amendment contain incorporations by reference? No9) Are there any other proposed amendments pending on this Part: Yes

Section Numbers	Proposed Action	IL Register Citation
130.1001	Amendment	5/14/93, 17 Ill. Reg. 6955
130.1801	Amendment	5/14/93, 17 Ill. Reg. 6955
130.535	Amendment	6/11/93, 17 Ill. Reg. 8461

10) Statement of Statewide Policy Objectives: This rulemaking does not create a state mandate, nor does it modify any existing state mandates.11) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Persons who wish to submit comments on this proposed rule may submit them in writing by no later than 45 days after publication of this notice to:

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

Keith W. Staats
Staff Attorney
Illinois Department of Revenue
Legal Services Bureau
101 West Jefferson
Springfield, Illinois 62708
Phone: (217) 782-7054

12) Initial Regulatory Flexibility Analysis:A) Types of small businesses affected: Any small business subject to the Retailers' Occupation Tax Act.B) Reporting, bookkeeping or other procedures required for compliance: No new reporting, bookkeeping or other procedures are required for compliance.C) Types of professional skills necessary for compliance: No additional skills are needed for compliance.The full text of the Proposed Amendment(s) begins on the next page:

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

TITLE 86: REVENUE
CHAPTER I: DEPARTMENT OF REVENUE

PART 130

RETAILERS' OCCUPATION TAX

SUBPART A: NATURE OF TAX

Section
130.101 Character and Rate of Tax
130.102 Responsibility of Trustees, Receivers, Executors or Administrators
130.105 Occasional Sales
130.110 Sale of Used Motor Vehicles by Leasing or Rental Business
130.111 Habitual Sales
130.115 Nontaxable Transactions
130.120

SUBPART B: SALE AT RETAIL

Section
130.201 The Test of a Sale at Retail
130.205 Sales for Transfer Incident to Service
130.210 Sales of Tangible Personal Property to Purchasers for Resale
130.215 Further Illustrations
130.220 Sales to Lessors of Tangible Personal Property

SUBPART C: CERTAIN STATUTORY EXEMPTIONS

Section
130.305 Farm Machinery and Equipment
130.310 Food, Drugs, Medicines and Medical Appliances
130.315 Fuel Sold for Use in Vessels on Rivers Bordering Illinois
130.320 Gasohol
130.321 Fuel Used by Air Common Carriers in International Flights
130.325 Graphic Arts Machinery and Equipment Exemption
130.330 Manufacturing Machinery and Equipment
130.335 Pollution Control Facilities
130.340 Rolling Stock
130.345 Oil Field Exploration, Drilling and Production Equipment
130.350 Coal Exploration, Mining, Off Highway Hauling, Processing, Maintenance and Reclamation Equipment

SUBPART D: GROSS RECEIPTS

Section
130.401 Meaning of Gross Receipts
130.405 How to Avoid Paying Tax on State Tax Passed on to the Purchaser
130.410 Cost of Doing Business Not Deductible
130.415 Transportation and Delivery Charges
130.420 Finance or Interest Charges--Penalties--Discounts
130.425 Traded-In Property

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

130.430 Deposit or Prepayment on Purchase Price
130.435 State and Local Taxes Other Than Retailers' Occupation Tax
130.440 Penalties
130.445 Federal Taxes
130.450 Installation, Alteration and Special Service Charges

SUBPART E: RETURNS

Section
130.501 Monthly Tax Returns--When Due--Contents
130.502 Quarterly Tax Returns
130.505 Returns and How to Prepare
130.510 Annual Tax Returns
130.515 First Return
130.520 Final Returns When Business is Discontinued
130.525 Who May Sign Returns
130.530 Returns Covering More Than One Location Under Same Registration--Separate Returns for Separately Registered Locations
130.535 Payment of the Tax, Including Quarter Monthly Payments in Certain Instances
130.540 Returns on a Transaction by Transaction Basis
130.545 Registrants Must File a Return for Every Return Period
130.550 Filing of Returns for Retailers by Suppliers Under Certain Circumstances
130.551 Prepayment of Retailers' Occupation Tax on Motor Fuel
130.555 Vending Machine Information Returns
130.560 Verification of Returns

SUBPART F: INTERSTATE COMMERCE

Section
130.601 Preliminary Comments
130.605 Sales of Property Originating in Illinois
130.610 Sales of Property Originating in Other States

SUBPART G: CERTIFICATE OF REGISTRATION

Section
130.701 General Information on Obtaining a Certificate of Registration
130.705 Procedure in Disputed Cases Involving Financial Responsibility Requirements
130.710 Procedure When Security Must be Forfeited
130.715 Sub-Certificates of Registration
130.720 Separate Registrations for Different Places of Business of Same Taxpayer Under Some Circumstances
130.725 Display
130.730 Replacement of Certificate
130.735 Certificate Not Transferable
130.740 Certificate Required For Mobile Vending Units
130.745 Revocation of Certificate

DEPARTMENT OF REVENUE

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

NOTICE OF PROPOSED AMENDMENTS

SUBPART H: BOOKS AND RECORDS

130.1405 Seller's Responsibility to Obtain Certificates of Resale and Requirements for Certificates of Resale (Repealed)

130.1410 Requirements for Certificates of Resale (Repealed)

130.1415 Resale Number—When Required and How Obtained

130.1420 Blanket Certificate of Resale (Repealed)

Section
130.801 General Requirements

130.805 What Records Constitute Minimum Requirement

130.810 Records Required to Support Deductions

130.815 Preservation and Retention of Records

130.820 Preservation of Books During Pendency of Assessment Proceedings

130.825 Department Authorization to Destroy Records Sooner Than Would Otherwise be Permissible

SUBPART I: PENALTIES AND INTEREST

Section
130.1501 SUBPART O: CLAIMS TO RECOVER ERRONEOUSLY PAID TAX

130.1505 Claims for Credit—Limitations—Procedure

130.1510 Disposition of Credit Memoranda by Holders Thereof

130.1515 Refunds

Interest

Section
130.901 Civil Penalties

130.905 Interest

130.910 Criminal Penalties

SUBPART J: BINDING OPINIONS

SUBPART P: PROCEDURE TO BE FOLLOWED UPON
SELLING OUT OR DISCONTINUING BUSINESS

When Opinions from the Department are Binding

Section
130.1601

SUBPART K: SELLERS LOCATED ON,
OR SHIPPING TO, FEDERAL AREAS

When Returns are Required After a Business is Discontinued

When Returns Are Not Required After Discontinuation of a Business

Cross Reference to Bulk Sales Regulation

Section
130.1601

Definition of Federal Area

When Deliveries on Federal Areas Are Taxable

No Distinction Between Deliveries on Federal Areas and Illinois Deliveries Outside Federal Areas

Section
130.1701

SUBPART L: TIMELY MAILING TREATED
AS TIMELY FILING AND PAYING

SUBPART Q: NOTICE OF SALES OF GOODS IN BULK

Bulk Sales: Notices of Sales of Business Assets

SUBPART R: POWER OF ATTORNEY

When Powers of Attorney May be Given

Filing of Power of Attorney With Department

Filing of Papers by Agent Under Power of Attorney

Section
130.1801

Section
130.1201 General Information

130.1205 Due Date that Falls on Saturday, Sunday or a Holiday

SUBPART M: LEASED PORTIONS OF LESSOR'S BUSINESS SPACE

SUBPART S: SPECIFIC APPLICATIONS

Addition Agents to Plating Baths

Agricultural Producers

Antiques, Curios, Art Work, Collectors' Coins, Collectors' Postage

Stamps and Like Articles

Auctioneers and Agents

Barbers and Beauty Shop Operators

Blacksmiths

Chiroprodists, Osteopaths and Chiropractors

Computer Software

Construction Contractors and Real Estate Developers

Co-operative Associations

Dentists

Enterprise Zones

Farm Chemicals

When Lessee of Premises Must File Return for Leased Department

When Lessor of Premises Should File Return for Leased Department

Meaning of "Lessor" and "Lessee" in this Regulation

Section
130.1901

SUBPART N: SALES FOR RESALE

Seller's Responsibility to Determine the Character of the Sale at the Time of the Sale

Section
130.1401

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

130.1960 Finance Companies and Other Lending Agencies - Installment Contracts - Repossessions

130.1965 Florists and Nurserymen

130.1970 Hatcheries

130.1975 Operators of Games of Chance and Their Suppliers

130.1980 Optometrists and Opticians

130.1985 Pawnbrokers

130.1990 Peddlers, Hawkers and Itinerant Vendors

130.1995 Personalizing Tangible Personal Property

130.2000 Persons Engaged in the Printing, Graphic Arts or Related Occupations, and Their Suppliers

130.2005 Persons Engaged in Nonprofit Service Enterprises and in Similar Enterprises Operated As Businesses, and Suppliers of Such Persons

130.2006 Sales by Teacher-Sponsored Student Organizations

130.2007 Exemption Identification Numbers

130.2008 Sales by Nonprofit Service Enterprises

130.2010 Persons Who Rent or Lease the Use of Tangible Personal Property to Others

130.2015 Persons Who Repair or Otherwise Service Tangible Personal Property

130.2020 Physicians and Surgeons

130.2025 Picture-Framers

130.2030 Public Amusement Places

130.2035 Registered Pharmacists and Druggists

130.2040 Retailers of Clothing

130.2045 Retailers on Premises of the Illinois State Fair, County Fairs, Art Shows, Flea Markets and the Like

130.2050 Sales and Gifts By Employers to Employees

130.2055 Sales by Governmental Bodies

130.2060 Sales of Alcoholic Beverages, Motor Fuel and Tobacco Products

130.2065 Sales of Automobiles for Use in Demonstration

130.2070 Sales of Containers, Wrapping and Packing Materials and Related Products

130.2075 Sales To Construction Contractors, Real Estate Developers and Speculative Builders

130.2080 Sales to Governmental Bodies, Foreign Diplomats and Consular Personnel

130.2085 Sales to or by Banks, Savings and Loan Associations and Credit Unions

130.2090 Sales to Railroad Companies

130.2095 Sellers of Gasohol, Coal, Coke, Fuel Oil and Other Combustibles

130.2100 Sellers of Feeds and Breeding Livestock

130.2105 Sellers of Newspapers, Magazines, Books, Sheet Music and Phonograph Records and Their Suppliers

130.2110 Sellers of Seeds and Fertilizer

130.2115 Sellers of Machinery, Tools and the Like

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

130.2120 Suppliers of Persons Engaged in Service Occupations and Professions

130.2125 Trading Stamps and Discount Coupons

130.2130 Undertakers and Funeral Directors

130.2135 Vending Machines

130.2140 Vendors of Curtains, Slip Covers, Floor Covering and Other Similar Items made to Order

130.2145 Vendors of Meals

130.2150 Vendors of Memorial Stones and Monuments

130.2155 Vendors of Signs

130.2156 Vendors of Steam

130.2160 Vendors of Tangible Personal Property Employed for Premiums, Advertising, Prizes, Etc.

130.2165 Veterinarians

130.2170 Warehousemen

130.ILLUSTRATION A: Examples of Tax Exemption Cards

AUTHORITY: Implementing the Illinois Retailers' Occupation Tax Act (Ill. Rev. Stat. 1991, ch. 120, pars. 440 et seq.) [35 ILCS 120/1 et seq.] and authorized by Section 39b3 of the Civil Administrative Code of Illinois (Ill. Rev. Stat. 1991, ch. 127, par. 39b3) [20 ILCS 2505/39b3].

SOURCE: Adopted July 1, 1933; amended at 2 Ill. Reg. 50, p. 71, effective December 10, 1978; amended at 3 Ill. Reg. 12, p. 4, effective March 19, 1979; amended at 3 Ill. Reg. 13, pp. 93 and 95, effective March 25, 1979; amended at 3 Ill. Reg. 23, p. 164, effective June 3, 1979; amended at 3 Ill. Reg. 25, p. 229, effective June 17, 1979; amended at 3 Ill. Reg. 44, p. 193, effective October 19, 1979; amended at 3 Ill. Reg. 46, p. 52, effective November 2, 1979; amended at 4 Ill. Reg. 24, pp. 520, 539, 564 and 571, effective June 1, 1980; amended at 5 Ill. Reg. 818, effective January 2, 1981; amended at 5 Ill. Reg. 3014, effective March 11, 1981; amended at 5 Ill. Reg. 12782, effective November 2, 1981; amended at 6 Ill. Reg. 2860, effective March 3, 1982; amended at 6 Ill. Reg. 6780, effective May 24, 1982; codified at 6 Ill. Reg. 8229; recodified at 6 Ill. Reg. 8999; amended at 6 Ill. Reg. 15225, effective December 3, 1982; amended at 7 Ill. Reg. 7990, effective June 15, 1983; amended at 8 Ill. Reg. 5319, effective April 11, 1984; amended at 8 Ill. Reg. 19062, effective September 26, 1984; amended at 10 Ill. Reg. 1937, effective January 10, 1986; amended at 10 Ill. Reg. 12067, effective July 1, 1986; amended at 10 Ill. Reg. 19538, effective November 5, 1986; amended at 10 Ill. Reg. 19772, effective November 5, 1986; amended at 11 Ill. Reg. 4325, effective March 2, 1987; amended at 11 Ill. Reg. 6252, effective March 20, 1987; amended at 11 Ill. Reg. 18284, effective October 27, 1987; amended at 11 Ill. Reg. 18767, effective October 28, 1987; amended at 11 Ill. Reg. 19138, effective October 29, 1987; amended at 11 Ill. Reg. 19696, effective November 23, 1987; amended at 12 Ill. Reg. 5652, effective March 15, 1988; emergency amendment at 12 Ill. Reg. 14401, effective September 1, 1988, for a maximum of 150 days, modified in response to an objection of the Joint Committee on Administrative

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

Rules at 12 Ill. Reg. 19531, effective November 4, 1988, not to exceed the 150 day time limit of the original rulemaking; emergency expired January 29, 1989; amended at 13 Ill. Reg. 11824, effective June 29, 1989; amended at 14 Ill. Reg. 241, effective December 21, 1989; amended at 14 Ill. Reg. 872, effective January 1, 1990; amended at 14 Ill. Reg. 15463, effective September 10, 1990; amended at 14 Ill. Reg. 16028, effective September 18, 1990; amended at 15 Ill. Reg. 6621, effective April 17, 1991; amended at 15 Ill. Reg. 13542, effective August 30, 1991; amended at 15 Ill. Reg. 15757, effective October 15, 1991; amended at 16 Ill. Reg. 1642, effective January 13, 1992; amended at 17 Ill. Reg. 860, effective January 11, 1993, amended at — Ill. Reg. —, effective —.

SUBPART I: PENALTIES AND INTEREST

Section 130.901 Civil Penalties

The Retailers' Occupation Tax Act provides the following penalties for violations of the Act or of any Regulation of the Department issued pursuant thereto:

a) Filing an Incorrect Return

"If the tax computed upon the basis of the gross receipts as fixed by the Department is greater than the amount of tax due under the return or returns as filed, the Department shall (or if the tax or any part thereof that is admitted to be due by a return or returns, whether filed on time or not, is not paid, the Department may) issue the taxpayer a notice of tax liability for the amount of tax claimed by the Department to be due, together with a penalty of 10% thereof. Provided, that if the incorrectness of any return or returns as determined by the Department is due to fraud, said penalty shall be 30% of the tax due" (Section 4 of the Act). The above-quoted penalties apply on or after January 1, 1988 through December 31, 1993.

b) Failure to File Return When Required, but Payment Prior to Notice of Tax Liability

"In case any person engaged in the business of selling tangible personal property at retail fails to file a return when and as herein required, but thereafter, prior to the Department's issuance of a notice of tax liability under this section, files a return and pays the tax, he shall also pay a penalty of 10% of the amount of the tax." (Section 5 of the Act)

- 1) The above-quoted penalty applies January 1, 1988 through December 31, 1993.

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

A) EXAMPLE: The taxpayer's return for November 1987, is required to be filed on or before December 31, 1987. The taxpayer files the return on January 10, 1988. Because the return is filed late in January 1988, it is subject to the 10% penalty rate that went into effect January 1, 1988.

B) EXAMPLE: The taxpayer's return for October 1987, is required to be filed on or before November 30, 1987. The taxpayer files the return on December 12, 1987. Because the return is filed late during December 1987, it is subject to the 7.5% penalty rate that was in effect during December 1987.

- 2) As to tax liability incurred before November 1, 1987, but on or after December 1, 1984, the penalty in this situation is 7.5%.

c) Filing Return at Required Time but Failure to Pay Tax

"In case any person engaged in the business of selling tangible personal property at retail files the return at the time required by the Act but fails to pay the tax, or any part thereof, when due, a penalty of 10% of the amount of the tax unpaid when due shall be added thereto." (Section 5 of the Act)

- 1) The above-quoted penalty applies on or after January 1, 1988 through December 31, 1993.
- 2) As to tax liability incurred before January 1, 1988, but on or after December 1, 1984, the penalty in this situation is 7.5%.

d) Filing Late Return Without Payment of Entire Tax

"In case any person engaged in the business of selling tangible personal property at retail fails to file a return when and as herein required, but thereafter, prior to the Department's issuance of a notice of tax liability under this section, files a return but fails to pay the entire tax, a penalty of 10% of the full amount of tax shown by such return shall be added thereto." (Section 5 of the Act)

- 1) The above-quoted penalty applies on or after January 1, 1988 through December 31, 1993.
- 2) As to tax liability incurred before January 1, 1988, but on or after December 1, 1984, the penalty in this situation is 7.5%.

ILLINOIS REGISTER

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

- e) Failure to File Return When Required, and Failure to Pay Prior to Notice by Department

"In case any person engaged in the business of selling tangible personal property at retail fails to file a return, the Department shall determine the amount of tax due from him according to its best judgment and information, which amount so fixed by the Department shall be prima facie correct and shall be prima facie evidence of the correctness of the amount of tax due, as shown in such determination. The Department shall issue the taxpayer a notice of tax liability for the amount of tax claimed by the Department to be due, together with a penalty of 30% thereof." (Section 5 of the Act)

- 1) The above-quoted penalty applies to tax liability incurred on or after December 1, 1984 through December 31, 1992.
- 2) As to tax liability incurred before December 1, 1984, but after July 1, 1965, the penalty in this situation is 20%.

- f) Beginning January 1, 1994, the Uniform Penalty and Interest Act applies to penalties imposed pursuant to Section 5 of the Act. Section 3-3 of the Uniform Penalty and Interest Act provides that:

A) A penalty of 5% of the tax required to be shown due on a return shall be imposed for failure to file the tax return on or before the due date prescribed for filing determined with regard for any extension of time for filing (penalty for late filing or nonfiling). If any unprocessable return is corrected and filed within 21 days after notice by the Department, the late filing or nonfiling penalty shall not apply. If a penalty for late filing or nonfiling is imposed in addition to the penalty for late payment, the total penalty due shall be the sum of the late filing penalty and the applicable late payment penalty.

- B) A penalty of 15% of the tax shown on the return or the tax required to be shown due on the return shall be imposed for failure to pay:

- i) the tax shown due on the return on or before the due date prescribed for payment of that tax, an amount of underpayment of estimated tax, or an amount that is reported in an amended return other than an amended return timely filed as required by subsection (b) of Section 506 of the Illinois Income Tax Act (penalty for late payment or nonpayment of admitted liability); or

ILLINOIS REGISTER

15512

93

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

- ii) the full amount of any tax required to be shown due on a return and which is not shown (penalty for late payment or nonpayment of additional liability), within 21 days after a notice of arithmetic error, notice and demand, or a final assessment is issued by the Department. In the case of a final assessment arising following a protest and hearing, the 21 day period shall not begin until all proceedings in court for review of the final assessment have terminated or the period for obtaining a review has expired without proceedings for a review having been instituted. In the case of a notice of tax liability that becomes a final assessment without a protest and hearing, the penalty provided in this Section shall be imposed at the expiration of the period provided for the filing of a protest. (Section 3-3(b) of the Uniform Penalty and Interest Act)

- g) Effect of a Taxpayer's Bankruptcy Filing Upon a Notice of Tax Liability

Generally, if a protest to a notice of tax liability and a request for hearing is not filed within 20 days after issuance of a notice of tax liability (NTL), such notice of tax liability shall become final without the necessity of a final assessment being issued and shall be deemed to be a final assessment. (See Section 5 of the Act) However, if prior to the issuance of the NTL, a taxpayer has filed a petition in U.S. Bankruptcy Court and the automatic stay is still in effect, or if a taxpayer files such a petition within 20 days of the issuance of an NTL, the automatic stay prevents any pre-petition liability included in the NTL from becoming final even though not protested within 20 days of the issuance of the NTL. If any pre-petition tax included in the NTL is not paid to the Department through the bankruptcy proceeding, adjudicated by the bankruptcy court, or discharged by the bankruptcy court, the taxpayer has 20 days after termination of the automatic stay to protest the pre-petition liability and request an administrative hearing pursuant to 86 Ill. Adm. Code 200.

- h) Over-Collection of Tax, or Collection of Tax on Nontaxable Receipts

"If a seller collects an amount (however designated) that purports to reimburse the seller for retailers' occupation tax liability measured by receipts that are not subject to retailers' occupation tax, or if a seller, in collecting an amount (however designated) that purports to reimburse the seller for retailers' occupation tax liability measured by receipts that are subject to tax under the Act, collects more from the purchaser than the seller's retailers' occupation tax liability on the transaction, the purchaser

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

shall have a legal right to claim a refund of that amount from the seller. If, however, that amount is not refunded to the purchaser for any reason, the seller is liable to pay that amount to the Department. This paragraph does not apply to an amount collected by the seller as reimbursement for the seller's retailers' occupation tax liability on receipts that are subject to tax under this Act as long as such collection is made in compliance with the tax collection brackets prescribed by the Department in its rules and regulations." (Section 2-40 of the Act)

(k) Filing Late Return Due to "Reasonable Cause"

- 1) "However, where the failure to file any tax return required under this Act on the date prescribed therefor (including any extensions thereof), is shown to be unintentional and nonfraudulent and has not occurred in the 2 years immediately preceding the failure to file on the prescribed date or is due to . . . other reasonable cause the penalties imposed by this Act shall not apply." (Section 5 of the Act)
- 2) In general, a "reasonable cause" for the failure to file any return would be what is acceptable to the federal government for federal income tax purposes as a "reasonable cause" for failure to file a federal income tax return.

(Source: Amended at — Ill. Reg. — effective —)

Section 130.905 Interest

- a) In addition to any penalty provided for in this Act, any amount of tax which is not paid when due shall bear interest at the rate of 1% prior to September 17, 1981, and at the rate of 2% on and after September 17, 1981 and prior to January 1, 1987, and at the rate of 1.25% on and after January 1, 1987 through December 31, 1993, per month or fraction thereof from the date when such tax becomes past due until such tax is paid or a judgment therefor is obtained by the Department. Beginning January 1, 1994, any amount of tax which is not paid when due shall bear interest at the rate and in the manner specified in Sections 3-2 and 3-9 of the Uniform Penalty and Interest Act from the date when such tax becomes past due until such tax is paid or a judgment therefor is obtained by the Department.

- b) If the time for making or completing an audit of a taxpayer's books and records is extended with the taxpayer's consent, at the request of and for the convenience of the Department, beyond the date on which the statute of limitations upon the issuance of a notice of tax liability by the

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

Department otherwise would run, no interest shall accrue during the period of such extension. (Section 5 of the Act)

(Source: Amended at — Ill. Reg. — effective —)

DEPARTMENT OF REVENUE

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

NOTICE OF PROPOSED AMENDMENTS

1) Heading of the Part: Service Occupation Act

2) Code Citation: 86 Ill. Adm. Code 140

3) Section Numbers:

140.801
140.1415

Proposed Action:

Amendment
Amendment

4) Statutory Authority: Implementing the Service Occupation Tax Act (Ill. Rev. Stat. 1991, ch. 120, par. 439.101 - 439.121) [35 ILCS 115/1 - 115/21] and the Uniform Penalty and Interest Act (Ill. Rev. Stat. 1991, ch. 120, par. 2603-1 - 2603-9) [35 ILCS 735/3-1 - 735/3-9]

5) A Complete Description of the Subjects and Issues Involved: This rulemaking amends the Department's rules concerning the Service Occupation Tax Act to include references to the Uniform Penalty and Interest Act ("the UPIA"). The Uniform Penalty and Interest Act is effective January 1, 1994. In a separate rulemaking in this edition of the Illinois Register, the Department has proposed a new Part (86 Ill. Adm. Code 700) that provides detailed rules on the new UPIA. These amendments to the Service Occupation Tax Act rules cross-reference the new UPIA and the new rules as appropriate.

6) Will this proposed rule replace an emergency rule currently in effect:
No

7) Does this rulemaking contain an automatic repeal date? No

8) Does this proposed amendment contain incorporations by reference? No

9) Are there any other proposed amendments pending on this Part: No

10) Statement of Statewide Policy Objectives: This rulemaking does not create a state mandate, nor does it modify any existing state mandates.

11) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Persons who wish to submit comments on this proposed rule may submit them in writing by no later than 45 days after publication of this notice to:

Keith W. Staats
Staff Attorney
Illinois Department of Revenue
Legal Services Bureau
101 West Jefferson
Springfield, Illinois 62708

Phone: (217) 782-7054

12) Initial Regulatory Flexibility Analysis:

A) Types of small businesses affected: Any small business subject to the Service Occupation Tax.

B) Reporting, bookkeeping or other procedures required for compliance: No new reporting, bookkeeping or other procedures are required for compliance.

C) Types of professional skills necessary for compliance: No additional skills are needed for compliance.

The full text of the Proposed Amendment(s) begins on the next page:

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

TITLE 86: REVENUE
CHAPTER I: DEPARTMENT OF REVENUE

PART 140

SERVICE OCCUPATION TAX

SUBPART A: NATURE OF TAX

Section 140.101	Basis and Rate of the Service Occupation Tax
140.105	Registration of Servicemen
140.110	Presumption that Tax Applies (Repealed)
140.115	Occasional Sales to Servicemen by Suppliers (Repealed)
140.120	Meaning of Serviceman
140.125	Examples of Nontaxability
140.126	Exemption of Food, Drugs and Medical Appliances
140.130	Suppliers of Printers (Repealed)
140.135	Sales of Drugs and Related Items, to or by Pharmacists
140.140	Other Examples of Taxable Transactions
140.145	Multi-Service Situations

SUBPART B: DEFINITIONS

Section 140.201	General Definitions
-----------------	---------------------

SUBPART C: BASE OF THE TAX

Section 140.301	Cost Price
140.305	Refunds by Supplier or Serviceman

SUBPART D: TAX RETURNS

Section 140.401	Monthly Returns When Due--Contents of Returns
140.405	Annual Tax Returns
140.410	Final Return
140.415	Taxpayers' Duty to Obtain Form
140.420	Annual Information Returns by Servicemen
140.425	Filing of Returns for Serviceman "Suppliers" by their Suppliers Under Certain Circumstances
140.430	Incorporation by Reference

SUBPART E: INTERSTATE COMMERCE

Section 140.501	Sales of Service Involving Property Originating in Illinois
140.505	Sales of Service Involving Property Originating Outside of Illinois (Repealed)

SUBPART F: REGISTRATION UNDER THE

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

SERVICE OCCUPATION TAX ACT

Section 140.601	General Information
-----------------	---------------------

SUBPART G: BOOKS AND RECORDS

Section 140.701	Requirements
-----------------	--------------

SUBPART H: PENALTIES, INTEREST AND PROCEDURES

Section 140.801	General Information
-----------------	---------------------

SUBPART I: WHEN OPINIONS FROM THE DEPARTMENT ARE BINDING

Section 140.901	Written Opinions
-----------------	------------------

SUBPART J: COLLECTION OF THE TAX

Section 140.1001	Payment of Tax to the Supplier
140.1005	Receipt to be Obtained for Tax Payments
140.1010	Payment of Tax Directly to the Department
140.1015	Itemization of the Tax by Suppliers
140.1020	Use of Bracket Chart
140.1025	Advertising in Regard to the Tax

SUBPART K: TIMELY MAILING TREATED AS TIMELY
FILING AND PAYING--MEANING OF DUE DATE WHICH
FALLS ON SATURDAY, SUNDAY OR A HOLIDAY

Section 140.1101	Filing of Documents with the Department
------------------	---

SUBPART L: LEASED PORTIONS OF LESSOR'S BUSINESS SPACE

Section 140.1201	When Lessee of Premises May File Return for Leased Department
140.1205	When Lessor of Premises Should File Return for Leased Department
140.1210	Meaning of "Lessor" and "Lessee" in this Regulation

SUBPART M: USE OF EXEMPTION CERTIFICATES

Section 140.1301	When Purpose of Serviceman's Purchase is Known (Repealed)
140.1305	When Purpose of Serviceman's Purchase is Unknown
140.1310	Blanket Percentage Exemption Certificates (Repealed)

SUBPART N: CLAIMS TO RECOVER ERRONEOUSLY PAID TAX

Section	
---------	--

ILLINOIS REGISTER

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

140.1401 Claims for Credit-Limitations-Procedure
140.1405 Disposition of Credit Memoranda by Holders Thereof
140.1410 Refunds
140.1415 Interest

Section SUBPART O: DISCONTINUATION OF A BUSINESS
140.1501 Procedures

Section SUBPART P: NOTICE OF SALES OF GOODS IN BULK
140.1601 Requirements and Procedures

Section SUBPART Q: POWER OF ATTORNEY

140.1701 General Information

AUTHORITY: Implementing the Service Occupation Tax Act (Ill. Rev. Stat. 1991-999, ch. 120, pars. 439.101-439.121 et seq.) [35 ILCS 115/1-115/21] and authorized by Section 39b30 of the Civil Administrative Code of Illinois (Ill. Rev. Stat. 1991-999, ch. 127, par. 39b30) [20 ILCS 2505/39b30].

SOURCE: Adopted May 21, 1962; amended at 3 Ill. Reg. 23, p. 161, effective June 3, 1979; amended at 3 Ill. Reg. 44, p. 198, effective October 19, 1979; amended at 4 Ill. Reg. 24, pp. 526, 536 and 550, effective June 1, 1980; amended at 5 Ill. Reg. 822, effective January 2, 1981; amended at 6 Ill. Reg. 2879, 2883, 2886, 2892, 2895 and 2897, effective March 3, 1982; codified at 6 Ill. Reg. 9326; amended at 9 Ill. Reg. 7941, effective May 14, 1985; amended at 11 Ill. Reg. 14090, effective August 11, 1987; emergency amendment at 12 Ill. Reg. 14419, effective September 1, 1988, for a maximum of 150 days; emergency expired January 29, 1989; amended at 13 Ill. Reg. 9388, effective June 6, 1989; amended at 14 Ill. Reg. 262, effective January 1, 1990; amended at 14 Ill. Reg. 15480, effective September 10, 1990; amended at 15 Ill. Reg. 5834, effective April 5, 1991; amended at — Ill. Reg. —, effective —.

SUBPART H: PENALTIES, INTEREST AND PROCEDURES

Section 140.801 General Information

All civil penalties, provisions concerning interest and procedures (such as the making of assessments, the venue and mode of conducting hearings, subpoenas, matters pertaining to judicial review and other procedural subjects), together with statutes of limitation (except that these apply from the date when the tax is due rather than from the date when the gross receipts

ILLINOIS REGISTER

15520
93

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

are received), are the same under the Service Occupation Tax Act as under the Retailers' Occupation Tax Act (see Retailers' Occupation Tax Regulations, 86 Ill. Adm. Code 130, Subpart I and Ill. Rev. Stat. 1979-1, ch. 120, pars. 440-453 et seq.) [35 ILCS 120/1-120/14]. For information concerning civil penalties and interest see the Uniform Penalty and Interest Act [35 ILCS 735/3-1 - 735/3-9] and 86 Ill. Adm. Code 700. For information concerning criminal penalties, see Section 15 of the Service Occupation Tax Act.

(Source: Amended at — Ill. Reg. —, effective —.)

Section 140.1415 Interest

- a) Effective February 1, 1985 until January 1, 1994, any credit or refund that is allowed under the Act shall bear interest at the rate of 1% per month or fraction thereof from the date when the erroneous payment for which the credit or refund is being allowed was made to the Department until the credit memorandum is issued or the refund is paid. Interest shall not be paid on claims filed after the effective date of the Uniform Penalty and Interest Act and 86 Ill. Adm. Code 700 except such interest which is paid in accordance with the Act. (Section 3-9 of the Uniform Penalty and Interest Act) [35 ILCS 735/3-9]
- EXAMPLE:** A taxpayer files a claim for credit with the Department on January 15, 1994 for an overpayment of Service Occupation Tax. The overpayment occurred in October 1992 when the taxpayer, an Illinois serviceman, made an sale of service to an Illinois service customer, collected service occupation tax and remitted the tax to the Department. The sale of service involved the repair of a piece of graphic arts machinery and equipment. The serviceman determined that the repair should have been made tax-free, refunded the tax to the service customer and filed a claim for credit with the Department. The credit memorandum is issued on June 15, 1994. Interest shall be paid at the rate of 1% per month for the period from October 1992 through December 31, 1993; and at the semiannually adjusted interest rate imposed pursuant to the Uniform Penalty and Interest Act from January 1, 1994 through June 15, 1994, the date on which the credit memorandum was issued by the Department.

- b) No interest will be allowed if the overpayment is found by the Department to have been made deliberately for the purpose of drawing interest, or if the overpayment is ascertained not to have been bona fide for some other reason.
- c) When a claim that is allowed is paid by means of a credit memorandum instead of by means of a cash refund, the claim will

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

be considered to have been paid when the credit memorandum is issued by the Department to the claimant, and no interest will be allowed or paid by the Department for any period subsequent to that, even if the claimant does not use or assign the credit memorandum immediately after it is issued.

(Source: Amended at ___ Ill. Reg. _____, effective _____)

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

- 1) Heading of the Part: Service Use Tax
- 2) Code Citation: 86 Ill. Adm. Code 160
- 3) Section Numbers: Proposed Action:
160.140 Amendment
160.165 Amendment
- 4) Statutory Authority: Implementing the Service Use Tax Act (Ill. Rev. Stat. 1991, ch. 120, par. 439.31 - 439.51) [35 ILCS 110/1 - 110/21] and the Uniform Penalty and Interest Act (Ill. Rev. Stat. 1991, ch. 120, par. 2603-1 - 2603-9) [35 ILCS 735/3-1 - 735/3-9]
- 5) A Complete Description of the Subjects and Issues Involved: This rulemaking amends the Department's rules concerning the Service Use Tax Act to include references to the Uniform Penalty and Interest Act ("the UPIA"). The Uniform Penalty and Interest Act is effective January 1, 1994. In a separate rulemaking in this edition of the Illinois Register, the Department has proposed a new Part (86 Ill. Adm. Code 700) that provides detailed rules on the new UPIA. These amendments to the Service Use Tax Act rules cross-reference the new UPIA and the new rules as appropriate.
- 6) Will this proposed rule replace an emergency rule currently in effect:
No
- 7) Does this rulemaking contain an automatic repeal date? No
- 8) Does this proposed amendment contain incorporations by reference? No
- 9) Are there any other proposed amendments pending on this Part? No
- 10) Statement of Statewide Policy Objectives: This rulemaking does not create a state mandate, nor does it modify any existing state mandates.
- 11) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Persons who wish to submit comments on this proposed rule may submit them in writing by no later than 45 days after publication of this notice to:

Keith W. Staats
Staff Attorney
Illinois Department of Revenue
Legal Services Bureau
101 West Jefferson
Springfield, Illinois 62708
Phone: (217) 782-7054

ILLINOIS REGISTER

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

12) Initial Regulatory Flexibility Analysis:

- A) Types of small businesses affected: Any small business subject to the Service Use Tax.
- B) Reporting, bookkeeping or other procedures required for compliance: No new reporting, bookkeeping or other procedures are required for compliance.
- C) Types of professional skills necessary for compliance: No additional skills are needed for compliance.

The full text of the Proposed Amendment(s) begins on the next page:

ILLINOIS REGISTER

15524

93

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

TITLE 86: REVENUE
CHAPTER I: DEPARTMENT OF REVENUE
PART 160
SERVICE USE TAX

Section:

160.101	Nature of the Tax
160.105	Definitions
160.110	Kinds of Uses And Users Not Taxed
160.115	Collection Of The Service Use Tax By Servicemen
160.120	Receipt For The Tax
160.125	Special Information For Taxable Users
160.130	Registration Of Servicemen
160.135	Serviceman's Return
160.140	Penalties, Interest And Procedures
160.145	Incorporation Of Illinois Service Occupation Tax Regulations By Reference
160.150	Claims To Recover Erroneously Paid Tax--Limitations--Procedures
160.155	Disposition Of Credit Memoranda By Holders Thereof
160.160	Refunds
160.165	Interest

AUTHORITY: Implementing the Service Use Tax Act (Ill. Rev. Stat. 1991-1989, ch. 120, pars. 439.31-439.51 et seq.) [35 ILCS 110/1 - 110/21] and authorized by Section 39b30 of the Civil Administrative Code of Illinois (Ill. Rev. Stat. 1991-1989, ch. 127, par. 39b30) [20 ILCS 2505/39b30].

SOURCE: Adopted May 21, 1962; codified at 6 Ill. Reg. 9326; amended at 8 Ill. Reg. 8619, effective June 5, 1984; amended at 11 Ill. Reg. 5322, effective March 17, 1987; amended at 11 Ill. Reg. 9963, effective May 8, 1987; amended at 13 Ill. Reg. 9399, effective June 6, 1989; amended at 15 Ill. Reg. 5845, effective April 5, 1991; amended at — Ill. Reg. —, effective —.

Section 160.140 Penalties, Interest And Procedures

When civil penalties, provisions concerning interest and procedures (such as the making of assessments, the venue and mode of conducting hearings, subpoenas, matters pertaining to judicial review and other procedural subjects), together with statutes of limitation, are the same under the Service Use Tax Act as under the Illinois Service Occupation Tax Act. For information concerning civil penalties and interest see the Uniform Penalty and Interest Act [35 ILCS 735/3-1 - 735/3-9] and 86 Ill. Adm. Code 700. For

information concerning criminal penalties, see Section 15 of the Service Use Tax Act.

(Source: Amended at Ill. Reg. effective

Section 160.165 Interest

a) Any credit or refund that is allowed under the Act shall bear interest at the rate of 1% per month or fraction thereof from the date when the erroneous payment for which the credit or refund is being allowed was made to the Department until the credit memorandum is issued or the refund is paid until January 1, 1994. *Interest shall not be paid on claims filed after the effective date of the Uniform Penalty and Interest Act and 86 Ill. Adm. Code 700 except such interest which is paid in accordance with the Act.* (Section 3-9 of the Uniform Penalty and Interest Act) [35 ILCS 735/3-9]

EXAMPLE: A taxpayer files a claim for credit with the Department on January 15, 1994 for an overpayment of Service Use Tax. The overpayment occurred in October 1992 when the taxpayer, an out-of-state registered serviceman, made a sale of service to an Illinois service customer, collected Service Use Tax on 50% of the total bill to the service customer and remitted the tax to the Department. The sale of service involved the repair of a piece of graphic arts machinery and equipment. The serviceman determined that the repair should have been made tax-free, refunded the tax to the service customer and filed a claim for credit with the Department. The credit memorandum is issued on June 15, 1994. Interest shall be paid at the rate of 1% per month for the period from October 1992 through December 31, 1993; and at the semiannually adjusted interest rate imposed pursuant to the Uniform Penalty and Interest Act from January 1, 1994 until June 15, 1994, the date on which the credit memorandum was issued by the Department.

b) No interest will be allowed if the overpayment is found by the Department to have been made deliberately for the purpose of drawing interest, or if the overpayment is ascertained not to have been bona fide for some other reason.

c) When a claim that is allowed is paid by means of a credit memorandum instead of by means of a cash refund, the claim will be considered to have been paid when the credit memorandum is issued by the Department to the claimant, and no interest will be allowed or paid by the Department for any period subsequent to that, even if the claimant does not use or assign the credit memorandum immediately after it is issued.

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

- 1) Heading of the Part: Use Tax
- 2) Code Citation: 86 Ill. Adm. Code 150
- 3) Section Numbers: Proposed Action:
150.1001 Amendment
150.1415 Amendment
- 4) Statutory Authority: Implementing the Use Tax Act (Ill. Rev. Stat. 1991, ch. 120, par. 439.1 - 439.22) [35 ILCS 105/1 - 105/22] and the Uniform Penalty and Interest Act (Ill. Rev. Stat. 1991, ch. 120, par. 2603-1 et seq.) [35 ILCS 735/3-1 et seq.]
- 5) A Complete Description of the Subjects and Issues Involved: This rulemaking amends the Department's rules concerning the Use Tax Act to include references to the Uniform Penalty and Interest Act ("the UPIA"). The Uniform Penalty and Interest Act is effective January 1, 1994. In a separate rulemaking in this edition of the Illinois Register, the Department has proposed a new Part (86 Ill. Adm. Code 700) that provides detailed rules on the new UPIA. These amendments to the Use Tax Act rules cross-reference the new UPIA and the new rules as appropriate.
- 6) Will this proposed rule replace an emergency rule currently in effect:
No
- 7) Does this rulemaking contain an automatic repeal date? No
- 8) Does this proposed amendment contain incorporations by reference? No
- 9) Are there any other proposed amendments pending on this Part: No
- 10) Statement of Statewide Policy Objectives: This rulemaking does not create a state mandate, nor does it modify any existing state mandates.
- 11) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Persons who wish to submit comments on this proposed rule may submit them in writing by no later than 45 days after publication of this notice to:

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

Keith W. Staats
Staff Attorney
Illinois Department of Revenue
Legal Services Bureau
101 West Jefferson
Springfield, Illinois 62708
Phone: (217) 782-7054

12) Initial Regulatory Flexibility Analysis:

- A) Types of small businesses affected: Any small business subject to the Use Tax Act.
- B) Reporting, bookkeeping or other procedures required for compliance: No new reporting, bookkeeping or other procedures are required for compliance.
- C) Types of professional skills necessary for compliance: No additional skills are needed for compliance.

The full text of the Proposed Amendment(s) begins on the next page:

DEPARTMENT OF REVENUE

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

NOTICE OF PROPOSED AMENDMENTS

TITLE 86 REVENUE
CHAPTER I: DEPARTMENT OF REVENUEPART 150
USE TAX

SUBPART A: NATURE OF THE TAX

Section	Description of the Tax
150.101	Rate and Base of Tax
150.105	How To Compute Depreciation
150.110	How to Determine Effective Date
150.115	Effective Date of New Taxes
150.120	Relation of Use Tax to Retailers' Occupation Tax
150.125	Accounting for the Tax
150.130	How to Avoid Paying Tax on Use Tax Collected From the Purchaser
150.135	

SUBPART B: DEFINITIONS

Section	General Definitions
150.201	
Section	SUBPART C: KINDS OF USES AND USERS NOT TAXED
150.301	
150.305	

Section	Cross References
150.306	Effect of Limitation that Purchase Must be at Retail From a Retailer to be Taxable
150.310	Interim Use and Demonstration Exemptions
150.315	Exemptions to Avoid Multi-State Taxation
150.320	Non-resident Exemptions
150.325	Meaning of "Acquired Outside This State"
	Charitable, Religious, Educational and Senior Citizens Recreational Organizations as Buyers
150.330	Governmental Bodies as Buyers

SUBPART D: COLLECTION OF THE USE TAX
FROM USERS BY RETAILERS

Section	Collection of the Tax by Retailers From Users
150.401	Tax Collection Brackets
150.405	Tax Collection Brackets for a 2-1/4% Rate of Tax (Repealed)
150.410	Tax Collection Brackets for a 2-1/2% Rate of Tax (Repealed)
150.415	Tax Collection Brackets for a 2-3/4% Rate of Tax (Repealed)
150.420	Tax Collection Brackets for a 3% Rate of Tax (Repealed)
150.425	Tax Collection Brackets for a 3-1/8% Rate of Tax (Repealed)
150.430	Tax Collection Brackets for a 3-1/4% Rate of Tax (Repealed)
150.435	Tax Collection Brackets for a 3-1/2% Rate of Tax (Repealed)
150.440	

150.445	Tax Collection Brackets for a 3-3/4% Rate of Tax (Repealed)
150.450	Tax Collection Brackets for a 4% Rate of Tax (Repealed)
150.455	Tax Collection Brackets for a 4-1/8% Rate of Tax (Repealed)
150.460	Tax Collection Brackets for a 4-1/4% Rate of Tax (Repealed)
150.465	Tax Collection Brackets for a 4-1/2% Rate of Tax (Repealed)
150.470	Tax Collection Brackets for a 4-3/4% Rate of Tax (Repealed)
150.475	Tax Collection Brackets for a 5% Rate of Tax (Repealed)
150.480	Tax Collection Brackets for a 5-1/8% Rate of Tax (Repealed)
150.485	Tax Collection Brackets for a 5-1/4% Rate of Tax (Repealed)
150.490	Tax Collection Brackets for a 5-1/2% Rate of Tax (Repealed)
150.495	Tax Collection Brackets for a 5-3/4% Rate of Tax (Repealed)
150.500	Tax Collection Brackets for a 6% Rate of Tax (Repealed)
150.505	Optional 1% Schedule (Repealed)
150.510	Exact Collection of Tax Required When Practicable
150.515	Prohibition Against Retailer's Representing That He Will Absorb The Tax
150.520	Display of Tax Collection Schedule
150.525	Methods for Calculating Tax on Sales of Items Subject to Differing Tax Rates

SUBPART E: RECEIPT FOR THE TAX

Section	Requirements
150.601	

SUBPART F: SPECIAL INFORMATION FOR TAXABLE USERS

Section	When and Where to File a Return
150.701	Use Tax on Items that are Titled or Registered in Illinois
150.705	Procedure in Claiming Exemption from Use Tax
150.710	Receipt for Tax or Proof of Exemption Must Accompany Application for Title or Registration
150.715	Display Certificates for House Trailers
150.716	Issuance of Title or Registration Where Retailer Fails or Refuses to Remit Tax Collected by Retailer from User
150.720	Direct Payment of Tax by User to Department on Intrastate Purchase Under Certain Circumstances
150.725	Direct Reporting of Use Tax to Department by Registered Retailers
150.730	

SUBPART G: REGISTRATION OF OUT-OF-STATE RETAILERS

Section	When Out-of-State Retailers Must Register and Collect Use Tax
150.801	Voluntary Registration by Certain Out-of-State Retailers
150.805	Incorporation by Reference
150.810	

SUBPART H: RETAILERS' RETURNS

Section	When and Where to File
150.901	

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

150.905 Deduction for Collecting Tax
 150.910 Incorporation by Reference
 150.915 Itemization of Receipts from Sales and the Tax Among the Different States from Which Sales are Made into Illinois

SUBPART I: PENALTIES, INTEREST AND PROCEDURES

Section
 150.1001

General Information

SUBPART J: TRADED-IN PROPERTY

Section
 150.1101

General Information

SUBPART K: INCORPORATION OF ILLINOIS
RETAILERS' OCCUPATION TAX REGULATIONS BY REFERENCE

Section
 150.1201

General Information

SUBPART L: BOOKS AND RECORDS

Section
 150.1301

Users' Records

150.1305

150.1310

150.1315

Use of Signs to Prove Collection of Tax as a Separate Item
 Consequence of Not Complying with Requirement of Collecting
 Use Tax Separately From the Selling Price
 Incorporation by Reference

150.1320

SUBPART M: CLAIMS TO RECOVER ERRONEOUSLY PAID TAX

Section

150.1401

150.1405

150.1410

150.1415

Claims for Credit—Limitations—Procedure
 Disposition of Credit Memoranda by Holders Thereof
 Refunds
 Interest

TABLE A Tax Collection Brackets

AUTHORITY: Implementing the Use Tax Act (Ill. Rev. Stat. ch. 120, pars. 439.1-439.22 ~~et seq.~~) [35 ILCS 105/1-105/22] and authorized by Section 39628 of the Civil Administrative Code of Illinois (Ill. Rev. Stat. 1991, ch. 127, par. 39628) [20 ILCS 2505/39628].

SOURCE: Adopted August 1, 1955; amended at 4 Ill. Reg. 24, p. 553, effective June 1, 1980; amended at 5 Ill. Reg. 5351, effective April 30, 1981; amended at 5 Ill. Reg. 11072, effective October 6, 1981; codified at 6 Ill. Reg. 9326; amended at 8 Ill. Reg. 3704, effective March 12, 1984; amended at 8 Ill. Reg. 7278, effective May 11, 1984; amended at 8 Ill. Reg. 8623, effective June

DEPARTMENT OF REVENUE

NOTICE OF PROPOSED AMENDMENTS

5, 1984; amended at 11 Ill. Reg. 6275, effective March 20, 1987; amended at 14 Ill. Reg. 6835, effective April 19, 1990; amended at 15 Ill. Reg. 5861, effective April 5, 1991; emergency amendment at 16 Ill. Reg. 14889, effective September 9, 1992, for a maximum of 150 days; amended at 17 Ill. Reg. 1947 effective February 2, 1993; amended at — Ill. Reg. —, effective —, —, —

SUBPART I: PENALTIES, INTEREST AND PROCEDURES

Section 150.1001 General Information

All civil penalties, provisions concerning interest and procedures (such as the making of assessments, the venue and mode of conducting hearings, subpoenas, matters pertaining to judicial review and other procedural subjects), together with statutes of limitation (except that these apply from the date when the tax is due rather than from the date when the gross receipts are received), are the same under the Use Tax Act as under the Illinois Retailers' Occupation Tax Act. For information concerning civil penalties and interest see the Uniform Penalty and Interest Act [35 ILCS 735/3-1 et seq.] and 86 Ill. Adm. Code 700. For information concerning criminal penalties, see Section 14 of the Use Tax Act.

(Source: Amended at — Ill. Reg. —, effective —, —, —)

Section 150.1415 Interest

a)

Any credit or refund that is allowed under the Act shall bear interest at the rate of 1% per month or fraction thereof from the date when the erroneous payment for which the credit or refund is being allowed was made to the Department until the credit memorandum is issued or the refund is paid until January 1, 1994. *Interest shall not be paid on claims filed after the effective date of the Uniform Penalty and Interest Act and 86 Ill. Adm. Code 700 except such interest which is paid in accordance with the Act.* (Section 3-9 of the Uniform Penalty and Interest Act) [35 ILCS 735/3-9]
EXAMPLE: A taxpayer files a claim for credit with the Department on January 15, 1994 for an overpayment of Use Tax. The overpayment occurred in October 1992 when the taxpayer self-assessed tax on a purchase of manufacturing machinery and equipment from an unregistered out-of-state retailer and then remitted the tax directly to the Department. The credit memorandum is issued on June 15 1994. Interest shall be paid at the rate of 1% per month for the period from October 1992

1) HEADING OF THE PART: Cock Pheasant, Hungarian Partridge, Bobwhite Quail, Rabbit and Crow Hunting

2) CODE CITATION: 17 Ill. Adm. Code 530

3) SECTION NUMBERS: ADOPTED ACTION:
530.10 Amendments
530.20 Amendments
530.70 Amendments
530.80 Amendments
530.90 Amendments
530.100 Amendments
530.105 Amendments
530.110 Amendments
530.115 Amendments
530.120 Amendments

4) STATUTORY AUTHORITY: Implementing and authorized by Sections 1.3, 1.4, 1.13, 2.1, 2.2, 2.33, 2.6, 2.7, 2.27, 2.30, 3.5, 3.27, 3.28 and 3.29 of the Wildlife Code (Ill. Rev. Stat. 1991, ch. 61, pars. 1.3, 1.4, 1.13, 2.1, 2.2, 2.33, 2.6, 2.7, 2.27, 2.30, 3.5, 3.27, 3.28 and 3.29) [520 ILCS 5/1.3, 1.4, 1.13, 2.1, 2.2, 2.33, 2.6, 2.7, 2.27, 2.30, 3.5, 3.27, 3.28 and 3.29].

5) EFFECTIVE DATE OF AMENDMENTS: SEPTEMBER 10, 1993

6) DOES THIS RULEMAKING CONTAIN AN AUTOMATIC REPEAL DATE? No

7) DO THESE AMENDMENTS CONTAIN INCORPORATIONS BY REFERENCE? No

8) DATE FILED IN AGENCY'S PRINCIPAL OFFICE: September 9, 1993

9) NOTICE OF PROPOSAL PUBLISHED IN ILLINOIS REGISTER: May 21, 1993, 17 Ill. Reg. 7138

10) HAS JCAR ISSUED A STATEMENT OF OBJECTIONS TO THESE RULES: No

11) DIFFERENCES BETWEEN PROPOSAL AND FINAL VERSION:

In Section 530.105(o), a portion of the Section on Horseshoe Lake was put back in: "Horseshoe Lake State Park (Madison County) (hunting season opens the first hunting day after the close of the duck hunting season).

In Section 530.105(o), the following was added:

through December 31, 1993; and at the semiannually adjusted interest rate imposed pursuant to the Act and these rules from January 1, 1994 through June 15, 1994, the date on which the credit memorandum was issued by the Department.

b) No interest will be allowed if the overpayment is found by the Department to have been made deliberately for the purpose of drawing interest, or if the overpayment is ascertained not to have been bona fide for some other reason.

c) When a claim that is allowed is paid by means of a credit memorandum instead of by means of a cash refund, the claim will be considered to have been paid when the credit memorandum is issued by the Department to the claimant, and no interest will be allowed or paid by the Department for any period subsequent to that, even if the claimant does not use or assign the credit memorandum immediately after it is issued.

(Source: Amended at — Ill. Reg. — effective

DEPARTMENT OF CONSERVATION

NOTICE OF ADOPTED AMENDMENTS

Joliet Army Ammunition Plant - Will County (if negotiations between the Department and the United States Army are successfully concluded in time to have pheasant, rabbit, quail and partridge hunting at this site, regulations and requirements shall be publically announced)

In Section 530.105(o), Kankakee River, "may not be harvested" was changed to "shall not be harvested".

In Section 530.110(e), Des Plaines, was changed to read:

"... (open November 20-17 and 18 and December 4-1 and 2 and Wednesday through Sunday--after permit pheasant season, and runs five days thereafter except closed on Mondays, Tuesdays, and the following Wednesday . . .".

In Section 530.110(e), the following was added:

Snake Den Hollow Fish and Wildlife Area (hunting permitted from the day after the close of the Fulton-Knox County zone goose season until the close of the statewide rabbit season.

12) HAVE ALL THE CHANGES AGREED UPON BY THE AGENCY AND JCAR BEEN MADE AS INDICATED IN THE AGREEMENT LETTER ISSUED BY JCAR? Yes

13) WILL THESE AMENDMENTS REPLACE AN EMERGENCY RULE (AMENDMENT, REPEALER) CURRENTLY IN EFFECT? No

14) ARE THERE ANY AMENDMENTS PENDING ON THIS PART? No

15) SUMMARY AND PURPOSE OF AMENDMENTS: The amendments to this Part change the 1993-94 season dates and standardize them so hunters can predict dates for future years to appropriately plan vacations, etc.; modify site specific regulations; open two new state sites to hunting and close one site to hunting.

16) INFORMATION AND QUESTIONS REGARDING THESE ADOPTED AMENDMENTS SHALL BE DIRECTED TO:

Jack Price
Department of Conservation
524 S. Second Street, Room 485
Springfield, IL 62701-1787

THE FULL TEXT OF THE ADOPTED AMENDMENTS BEGINS ON THE NEXT PAGE:

DEPARTMENT OF CONSERVATION

NOTICE OF ADOPTED AMENDMENT(S)

TITLE 17: CONSERVATION
CHAPTER I: DEPARTMENT OF CONSERVATION
SUBCHAPTER b: FISH AND WILDLIFE

PART 530

COCK PHEASANT, HUNGARIAN PARTRIDGE, BOBWHITE QUAIL,
RABBIT AND CROW HUNTING

Section

530.10	Statewide General Regulations
530.20	Statewide Cock Pheasant, Hungarian Partridge, Bobwhite Quail, and Cottontail and Swamp Rabbit Regulations
530.30	Statewide Hungarian Partridge Regulations (Repealed)
530.40	Statewide Bobwhite Quail Regulations (Repealed)
530.50	Statewide Rabbit Regulations (Repealed)
530.60	Statewide Crow Regulations
530.70	Controlled Pheasant Hunting Sites Permit Requirements
530.80	Controlled Pheasant Hunting Regulations
530.90	Illinois Youth Pheasant Hunting Sites Permit Requirements
530.100	Illinois Youth Pheasant Hunting Regulations
530.105	Regulations for Fee Hunting of Pheasant, Hungarian Partridge, Quail and Rabbit at Controlled Daily Drawing Pheasant Hunting Sites
530.110	Regulations for Non-Fee Hunting of Cock Pheasant, Hungarian Partridge, Quail, and Rabbit at Various Department-Owned or -Managed Sites
530.115	Regulations for Hunting by Falconry Methods at Various Department-Owned or -Managed Sites
530.120	Regulations for Hunting Crow at Various Department-Owned or -Managed Sites

AUTHORITY: Implementing and authorized by Sections 1.3, 1.4, 1.13, 2.1, 2.2, 2.33, 2.6, 2.7, 2.27, 2.30, 3.5, 3.27, 3.28, and 3.29 of the Wildlife Code (Ill. Rev. Stat. 1991, ch. 61, pars. 1.3, 1.4, 1.13, 2.1, 2.2, 2.33, 2.6, 2.7, 2.27, 2.30, 3.5, 3.27, 3.28, and 3.29) [520 ILCS 5/1.3, 1.4, 1.13, 2.1, 2.2, 2.33, 2.6, 2.7, 2.27, 2.30, 3.5, 3.27, 3.28 and 3.29].

SOURCE: Adopted at 5 Ill. Reg. 8777, effective August 25, 1981; codified at 5 Ill. Reg. 10634; amended at 6 Ill. Reg. 10667, effective August 20, 1982; amended at 7 Ill. Reg. 10755, effective August 24, 1983; amended at 8 Ill. Reg. 21574, effective October 23, 1984; amended at 9 Ill. Reg. 15846, effective October 8, 1985; amended at 10 Ill. Reg. 15579, effective September 16, 1986; emergency amendments at 10 Ill. Reg. 18822, effective October 16, 1986, for a maximum of 150 days; emergency expired March 15, 1987; amended at 11 Ill. Reg. 10546, effective May 21, 1987; amended at 12 Ill. Reg. 12016, effective July 7, 1988; amended at 13 Ill. Reg. 12796, effective July 21, 1989; emergency amendments at 13 Ill. Reg. 12985, effective July 31, 1989, for a maximum of 150 days; emergency expired December 28, 1989; amended at 13 Ill. Reg. 17348, effective October 27, 1989; amended at 14 Ill. Reg. 10755, effective June 20, 1990; emergency amendments at 14 Ill. Reg. 18324, effective October 29, 1990.

DEPARTMENT OF CONSERVATION

NOTICE OF ADOPTED AMENDMENT(S)

for a maximum of 150 days; emergency expired March 28, 1991; amended at 15 Ill. Reg. 9924, effective June 24, 1991; amended at 15 Ill. Reg. 18138, effective December 6, 1991; amended at 16 Ill. Reg. 12470, effective July 28, 1992; amended at 16 Ill. Reg. 18951, effective December 1, 1992; amended at 17 Ill. Reg. 15534, effective September 10, 1993.

Section 530.10 Statewide General Regulations

~~Shooting~~Came breeding and hunting preserve areas licensed pursuant to Section 3.27 of the Wildlife Code (Ill. Rev. Stat. 1991, ch. 61, par. 3.27) and managed pursuant to Sections 3.28 and 3.29 of the Wildlife Code (Ill. Rev. Stat. 1991, ch. 61, pars. 3.28 and 3.29) are exempt from all provisions in this Part except for those pertaining to rabbit and crow in Section 530.20 and 530.60.

(Source: Amended at 17 Ill. Reg. 15534, effective September 10, 1993)

Section 530.20 Statewide Cock Pheasant, Hungarian Partridge, Bobwhite Quail, and Cottontail and Swamp Rabbit Regulations

a) Zones: South zone consists of all lands south of the line that follows U.S. Route 36 from the Indiana State line to Springfield, Route 29 from Springfield to Pekin and Route 9 from Pekin to Dallas City, then due west to the Mississippi River; north zone is the remainder of the State.

b) Season dates:
North (all species) - November--77-1992---January-67-1993 first Saturday in November through January 5, 1994.
South (all species) - November-77-1992---January-107--1993 first Saturday in November through the second Sunday in January.

c) Hunting hours: Sunrise until sunset.

d) Daily limit:

- Cock pheasant - 2
- Bobwhite Quail - 8
- Hungarian Partridge - 2
- Rabbit - 4
- Cock Pheasant - 6
- Bobwhite Quail - 20
- Hungarian Partridge - 6
- Rabbit - 10

f) Cock pheasant may be hunted only; hen pheasants are illegal to take or possess, except as specified on controlled hunting areas operated pursuant to Sections 1.13 or 3.27 of the Wildlife Code (Ill. Rev. Stat. 1991, ch. 61, pars. 1.13 or 3.27) [520 ILCS 5/1.13 or 3.27] or at sites listed in Section 530.105 and as provided for on designated sites in Section 530.110, and by falconry methods as described in 17 Ill. Adm. Code 1590, Falconry and the Captive Propagation of Raptors.

DEPARTMENT OF CONSERVATION

NOTICE OF ADOPTED AMENDMENT(S)

(Source: Amended at 17 Ill. Reg. 15534, effective September 10, 1993)

Section 530.70 Controlled Pheasant Hunting Sites Permit Requirements

a) Applicants must contact the Department of Conservation (Department or DOC) to obtain a permit reservation (except for Wayne Fitzgerald, Silver Springs State Park, Ramsey Lake State Park, Site M, Lee County Conservation Area (Green River) and Moraine View State Park where applicants must contact the concessionaire). Starting dates and methods for making reservations will be publicly announced. Only applications for reservations submitted by Illinois residents will be processed during the first two weeks of the application period. Applicants making reservations will be sent confirmation.

b) Permits will be issued until the daily quota is filled. The daily quota is determined by the formula one hunter per 10 to 40 huntable acres. Huntable acres are determined by, but not limited to, the biological studies on the number of the species available, the condition, topography, and configuration of the land at the site, the condition of the roads at the site, and the number of employees available to work at the site.

c) The permit authorizes the permit holder to bring one hunting partner. (The hunting partner cannot hunt without the permit holder being present to hunt.) The Springfield Permit Office cannot transfer or alter reservations to change hunting areas, dates or hunters' names. Permits cannot be transferred on the hunting areas. For other information write to:

Illinois Department of Conservation
Permit-Office---Pheasant
2nd-Flr--Lincoln-Tower-Plaza
524 South Second St., Room 210
P.O. Box 19457
Springfield, Illinois 62701-1787 62794-9157

d) Reservations for pheasant hunting will be issued from the Springfield Permit Office for Chain O'Lakes State Park, Des Plaines State-Park-and-Wildlife Conservation Area, Eldon Hazlet State Park (Carlyle Lake), Iroquois County State-Wildlife Conservation Area, Wayne-Pittsgerreit State-Recreation-Area-(Rend-Lake)77 Richland County Controlled Pheasant Hunting Area and--Green--River--State--Wildlife--Area--(Bee--County Conservation-Area).

(Source: Amended at 17 Ill. Reg. 15534, effective September 10, 1993)

Section 530.80 Controlled Pheasant Hunting Regulations

a) The controlled hunting season is November 4 3 through December 13 12, both dates inclusive, with the following exceptions:

- 1) All areas shall be closed to pheasant permit hunting on every

DEPARTMENT OF CONSERVATION

NOTICE OF ADOPTED AMENDMENT(S)

Monday and Tuesday during the controlled hunting season and November 20 19 and December 4 2, 1992 1993.

- 2) All areas are open to the Illinois Youth Pheasant Hunting Program only on November 8.

- 3) The controlled hunting season on the Green-River--State--Wildlife Area--(Lee-County-Conservation-Area) Des Plaines Conservation Area and the Iroquois County Conservation Area is November 4 3 through Thursday--before-the-first-firearm-deer-season--and--from--Wednesday following--the-first-firearm-deer-season--through--December--13--and December--19--and--December--20--November 14, November 24 through November 28 and December 3 through December 19, 1993.

- 4) The controlled hunting season on the Green-River--State--Wildlife Area--(Lee-County-Conservation-Area) Des Plaines Conservation Area and the Iroquois County Conservation Area is October--20--through--Thursday--before--the--first--firearm--deer--season--and--from--Wednesday--following--the--first--firearm--deer--season--through--December--6--and--December--12--and--December--13.

- 54) The controlled hunting season on the Wayne Fitzgerald State Recreation--Area Park (Rend Lake), Lee County Conservation Area (Green River), Wayne Fitzgerald State Park, Moraine View State Park, Silver Springs State Park and Ramsey Lake State Park will be publicly announced.

- b) Hunting hours are from 9:00 a.m. to 4:00 p.m. Hunters with reservations are required to check in at the check station between 7:00 a.m. and 8:00 a.m. Reservations are void after 8:00 a.m.

- c) When daily quotas are not filled, permits shall be issued on a first-come, first-served basis until 12:00 Noon.

- d) Hunters are required to deposit their hunting license in the check station while hunting. Persons exempt by law from having a hunting license must deposit their Firearm Owner's Identification Card. If they are under 21 years old and do not have a card they must be accompanied by a parent, legal guardian or a person in loco parentis who has a valid card in possession. A \$15.00 Daily Usage Stamp must be purchased at each area (except at Wayne Fitzgerald (Rend Lake), Silver Springs State Park, Ramsey Lake State Park, Moraine View State Park, Site M and Lee County Conservation Area, a Daily Usage Stamp is not required. Fees and method(s) of payment at Wayne--Fitzgerald these sites will be publicly announced).

- e) Hunters are required to wear a cap and upper outer garment of solid and vivid blaze orange of at least 400 square inches. Hunters must also wear a back patch issued by the check station.

- f) Anyone who has killed game previously and has it in his possession or in his vehicle must declare it with the person in charge of the area when he checks in. All such game found in a hunter's possession after he has started hunting on the area shall be considered illegally taken if the hunter has not declared it prior to going into the field.

- g) All hunting must be done with shotguns or bow and arrow. Only shot shells with a shot size of No. 5 lead or No. 3 steel or smaller may be used except at the Wayne Fitzgerald State Recreation--Area Park where only nontoxic shot may be possessed and only shot shells with a shot

DEPARTMENT OF CONSERVATION

NOTICE OF ADOPTED AMENDMENT(S)

size of No. 3 steel or smaller may be used. Flu flu arrows only may be used by bow and arrow hunters.

- h) Non-hunters are not allowed in the field.

- i) Hunters under 16 years of age must be accompanied by an adult hunter.

- j) Pheasants-only may be taken--Daily limit--Daily limits:

- 1) Two pheasants of either sex at Eldon Hazlet State Park, Chain O'Lakes State Park, Iroquois County State--Wildlife Conservation Area, Richland County Controlled Pheasant Hunting Area, Wayne Fitzgerald State Recreation--Area Park, Des Plaines State--Wildlife and--Wildlife Conservation Area and--Green--River--State--Wildlife Area--(Lee-County-Conservation-Area), Lee County Conservation Area (Green River) and Moraine View State Park.

- 2) Two pheasants of either sex, 8 bobwhite quail and 4 rabbits at Silver Springs State Park and Ramsey Lake State Park.

- 3) Two cock pheasants, 8 bobwhite quail and 4 rabbits at Site M.

- k) Tagging of birds.

All pheasants must be affixed with a Department tag before they are removed from the area during the controlled pheasant hunting season. The tag must remain on the leg of the pheasants until the pheasants are finally prepared for consumption.

- 1) Hunters may not leave the confines of any permit area and return to hunt on the permit area during the same day.

- m) It shall be unlawful to hunt on a site listed in subsection (j) above for the remainder of the controlled hunting season after being issued a citation for violation of the Wildlife Code (Ill. Rev. Stat. 1991, ch. 61, par. 2.33(g), (i), (j), (k), (n), (o), (p), (u), (x), (z), (cc) and (gg)) [520 ILCS 5/2.33(g), (i), (j), (k), (n), (o), (p), (u), (x), (z), (cc) and (gg)] or 17 Ill. Adm. Code 510.10(c)(4), (6), (11) and (12) and subsection 530.20(d) and subsections (d), (e), (g), and (j) of this Section, at that site. Hunters so cited may appeal the loss of hunting privileges to the site superintendent at the site where the violation(s) occurred. Hunters may also request a hearing within ten days of the citation by written request addressed to: Legal Division, Department of Conservation, 524 South Second Street, Springfield, IL 62706. Such hearing shall be governed by the provisions of 17 Ill. Adm. Code 2530.

(Source: Amended at 17 Ill. Reg. 15534, effective September 10, 1993)

Section 530.90 Illinois Youth Pheasant Hunting Sites Permit Requirements

- a) Applicants must contact the Department to obtain a permit reservation (except for Sangchris Lake and Rallsplitter State Park). Starting dates and methods for making reservations will be publicly announced. Only applications for reservations submitted by Illinois residents will be processed during the first two weeks of the application period. Applicants making reservations will be sent confirmation. Up to five reservations, but only one per applicant, may be made.

DEPARTMENT OF CONSERVATION

NOTICE OF ADOPTED AMENDMENT(S)

Multiple reservations for the same person will not be accepted and that person will forfeit his right to acquire a reservation for the season. There is no fee for the youth pheasant hunting permit.

- b) Only one permit per person will be issued until the daily quota is filled. The daily quota is determined by the formula one hunter per 10 to 40 huntable acres. Huntable acres are determined by, but not limited to, the biological studies on the number of the species available, the condition, topography, and configuration of the land at the site, the condition of the roads at the site, and the number of employees available to work at the site.

- c) The Springfield Permit Office cannot transfer or alter reservations to change hunting areas, dates or hunters' names. Permits cannot be transferred on the hunting areas. For other information (except Sangchris Lake and Railsplitter State Park) write to:

Illinois Department of Conservation

Permit Office---Pheasant

Lincoln Tower Plaza

524 South 2nd Street---Second Floor, Room 210

P.O. Box 19457

Springfield, Illinois 62761-1707 62794-9457

- d) Reservations for the Illinois Youth Pheasant Hunt will be issued from the Springfield Permit Office for Chain O'Lakes State Park, Des Plaines State-Fish-and-Wildlife Conservation Area, Eldon Hazlet State Park (Carlyle Lake), Iroquois County State-Wildlife Conservation Area, Moraine View State Recreation Area Park, Wayne Fitzgerald (Rend Lake) State Recreation-Area Park, Richland County Controlled Pheasant Hunting Area, Green-River-State-Wildlife-Area-thee-County-Conservation Area, and Horseshoe Lake Recreation-Area State Park (Madison County).

- e) Permits-for-the-Youth-Pheasant-Hunt-at-Sangchris-Lake-State-Park-will be-issued-by-a-mail-in-drawing-at-the-site-office---Registration procedures-and-hunter-quota-will-be-announced-by-public-news-release. Applicants--must-be-between-the-ages-of-10-15-inclusive---Permits available-after-the-drawing-will-be-allocated-on-a-first-come--basis from-the-site-office.

- f) Permits for the Youth Hunt at Sangchris Lake State Park, Railsplitter State Park and Mackinaw River State Fish & Wildlife Area will be issued by a mail-in drawing at the respective site office. Registration procedures and hunter quota will be announced by public news release. Applicants must be between the ages of 10-15 inclusive. Permits available after the drawing will be allocated on a first-come or first-call basis from the site office.

(Source: Amended at 17 Ill. Reg. 15534, effective September 10, 1993)

Section 530.100 Illinois Youth Pheasant Hunting Regulations

- a) The Illinois Youth Pheasant Hunt will be November 8, 1992 7, 1993, except at Sangchris Lake State Park where the hunt will be December 12

DEPARTMENT OF CONSERVATION

NOTICE OF ADOPTED AMENDMENT(S)

11, 1992 1993, and at Railsplitter State Park where the hunt will be November 20 27, 1992 1993 and at Mackinaw River State Fish & Wildlife Area where the hunt will be the first Saturday of the statewide upland season.

- b) Hunting hours are from 9:00 a.m. to 4:00 p.m. Hunters with reservations or permits are required to check in at the check station between 7:00 a.m. and 8:00 a.m. (between 8:00 a.m. and 8:30 a.m. at Sangchris Lake and Railsplitter State Park).

- c) All hunters must be between the ages of 10 and 15 inclusive and have a youth hunting permit. Stand-by permits will not be available except at Sangchris Lake and Railsplitter State Park.

- d) All hunters are required to deposit their hunting licenses in the check station while hunting. Each permit holder MUST be accompanied by a non-hunting supervisory adult, except at Mackinaw River State Fish & Wildlife Area where one supervisory adult per youth will be allowed hunting rights. If the hunter does not have a valid Firearm Owner's Identification Card (FOID), the supervisory adult is required to have a valid FOID Card. Only one supervisory adult in a hunting party is required to have a valid FOID Card if the hunters in the hunting party stay under the immediate control (accompany youth hunter at all times) of the supervisory adult possessing the valid FOID Card.

- e) Hunters and supervising adults are required to wear a cap and upper outer garment of solid and vivid blaze orange of at least 400 square inches. Hunters must also wear a back patch issued by the check station.

- f) Anyone who has killed game previously and has it in his possession or in his vehicle must declare it with the person in charge of the area prior to hunting on the area. All previously killed game found in a hunter's possession after he has started hunting on the area will be considered illegally taken if the hunter has not declared it prior to going into the field.

- g) All hunting must be done with shotguns. Only shot shells with a shot size of No. 5 lead or No. 3 steel or smaller may be used, except at the Wayne Fitzgerald State Recreation Area where only shot shells with a shot size of No. 3 steel or smaller may be used.

- h) Daily limit.

- 1) Two pheasants of either sex at Eldon Hazlet State Park, Chain O'Lakes State Park, Iroquois County State-Wildlife Conservation Area, Green-River-State-Wildlife-Area, Lee County Conservation Area, Des Plaines State-Fish-and-Wildlife-Area Conservation Area, Richland County Controlled Pheasant Hunting Area, Wayne Fitzgerald State Recreation-Area Park, Moraine View State Recreation-Area Park and Horseshoe Lake State Recreation-Area Park (Madison County).

- 2) Two-cock--pheasant,--eight--quati-and-four--rabbits--at-Sangchris-Lake-State-Park.

- 3) Two-cock--pheasant-and-four--rabbits--at-Railsplitter-State-Park.

- 4) Statewide Limits, Mackinaw River State Fish & Wildlife Area, Sangchris Lake State Park and Railsplitter State Park.

DEPARTMENT OF CONSERVATION

NOTICE OF ADOPTED AMENDMENT(S)

- i) All pheasants must be affixed with a Department tag before they are removed from the area (except Sangchris Lake and Railsplitter State Park and Mackinaw River State Fish & Wildlife Area). The tag must remain on the leg of the pheasants until the pheasants are finally prepared for consumption.

(Source: Amended at 17 Ill. Reg. 15534, effective September 10, 1993)

Section 530.105 Regulations for Fee Hunting of Pheasant, Hungarian Partridge, Quail and Rabbit at Controlled Daily Drawing Pheasant Hunting Sites

- a) All the regulations in 17 Ill. Adm. Code 510 - General Hunting and Trapping apply in this Section, unless this Section is more restrictive.
- b) All hunters must wear a cap and upper outer garment of solid and vivid blaze orange of at least 400 square inches.
- c) All areas are closed to fee upland game hunting Mondays and Tuesdays, Christmas Day and New Year's Day and November 20 19 and December 4 2.
- d) Hunting hours are 9:00 a.m. to 3:00 p.m. (except on Thanksgiving Day hunting hours are 9:00 a.m. to 1:00 p.m. at Kankakee River State Park, Silver Springs State Park and Sand Ridge State Forest).
- e) All hunting must be done with shotgun or bow and arrow. Only shot shells with a shot size of No. 5 lead or No. 3 steel or smaller may be used. Flu flu arrows only may be used by bow and arrow hunters.
- f) All pheasants must be affixed with a Department tag before they are removed from the area. The tag must remain on the leg of the pheasants until the pheasants are finally prepared for consumption.
- g) A drawing shall be held at the site for hunter quotas; a \$15.00 daily usage stamp is required opening date through the day following the final game bird release.
- h) When daily quotas are not filled, hunters are allowed to check in on a first-come first-served basis until 1:00 p.m.
- i) The Department shall announce by public news release the registration time and quota to be filled.
- j) Hunters are required to deposit their hunting license in the check station while hunting. Persons exempt by law from having a hunting license must deposit their Firearm Owner's Identification Card. If they are under 21 years old and do not have a card they must be accompanied by a parent, legal guardian or a person in loco parentis who has a valid card in possession.
- k) A back patch issued at the check station must be worn while hunting.
- l) Non-hunters are not allowed in the field.
- m) Hunters must not leave the site without first checking out.
- n) Daily Limit:
Pheasant - 2 (either sex may be harvested)
Bowhite Quail - 8
Hungarian Partridge - 2
Rabbit - 4

DEPARTMENT OF CONSERVATION

NOTICE OF ADOPTED AMENDMENT(S)

- o) Statewide regulations as provided for in this Part apply at the following Controlled Daily Drawing Pheasant Hunting sites, except as noted above and in parentheses below:

Horseshoe Lake State Park (Madison County) (hunting season opens the first hunting day after the close of the duck hunting season)
hunting-by--falconry--methods--allowed-from-day-after-controlled pheasant-season--through--the--close-of--statewide--upland--game falconry-season)

Johnson-Sauk Trail State Park
Joliet Army Ammunition Plant - Will County (if negotiations between the Department and the United States Army are successfully concluded in time to have pheasant, rabbit, quail and partridge hunting at this site, regulations and requirements shall be publicly announced)
Kankakee River State Park (Hunters must check out within 15 minutes of the close of hunting hours; quail shall not be harvested)

Sand Ridge State Forest

- Washington County Conservation Area
p) It shall be unlawful to hunt on a site listed in subsection (o) above for the remainder of the controlled hunting season after being issued a citation for violation of the Wildlife Code (Ill. Rev. Stat. 1991, ch. 61, par. 2-33(g), (i), (j), (k), (n), (o), (p), (u), (x), (z), (cc) and (gg)) 520 ILCS 5/2-33(g), (i), (j), (k), (n), (o), (p), (u), (x), (z), (cc) and (gg)) or 17 Ill. Adm. Code 510.10(c)(4), (6), (11) and (12), subsection 530.20(d) and subsections (b), (d) and (j) of this Section, at the site. Hunters so cited may appeal the loss of the hunting privileges to the site superintendent at the site where the violation(s) occurred. Hunters may also request a hearing within ten days of the citation by written request addressed to: Legal Division, Department of Conservation, 524 South Second Street, Springfield IL 62701. Such hearing shall be governed by the provisions of 17 Ill. Adm. Code 2530.

(Source: Amended at 17 Ill. Reg. 15534, effective September 10, 1993)

Section 530.110 Regulations for Non-Fee Hunting of Cock Pheasant, Hungarian Partridge, Quail, and Rabbit at Various Department-Owned or -Managed Sites

- a) All the regulations in 17 Ill. Adm. Code 510--General Hunting and Trapping apply in this Section, unless this Section is more restrictive.
- b) Flu flu arrows only may be used by bow and arrow hunters.
- c) Hunters engaged in quail, rabbit, pheasant, or Hungarian partridge hunting must wear a cap and upper outer garment of solid and vivid blaze orange of at least 400 square inches at all Department-owned or -managed sites.
- d) The Department will announce by public news release the registration

DEPARTMENT OF CONSERVATION

NOTICE OF ADOPTED AMENDMENT(S)

November 20, 17, and 18 and December 4, 1 and 2 and Wednesday through-Sunday after permit pheasant season, and runs five days thereafter, except closed on Mondays, Tuesdays, and the following Wednesday-through-Sunday-only-closed-on Christmas Day and New Year's Day; 9:00 a.m. to 4:00 p.m.; check in and check out required; daily quota filled by first-come, first-serve basis; hunters must wear DOC issued back patch while hunting; hunters must check out by 4:15 p.m.; only shot size of No. 5 lead or No. 3 steel or smaller may be used; pheasants of either sex may be taken; hens must be tagged with Department tag at the check station before leaving the area)

required; daily quota filled by first-come, first-serve basis; hunters must wear BOC issued back patch while hunting; hunters must check out by 4:15 p.m.; only shot size of No. 5 lead or No. 3 steel or smaller may be used; pheasants of either sex may be taken; hens must be tagged with Department tag at the check station before leaving the area)

must check out by 4:15 p.m.; only shot size of No. 5 lead or No. 3 steel or smaller may be used; pheasants of either sex may be taken; hens must be tagged with Department tag at the check station before leaving the area)

taken; hens must be tagged with Department tag at the check station before leaving the area)

Eldon Hazlet State Park (North of Allen Branch and West of Peppenhorst Branch only)

Fort de Charters Historic Site (hunting with muzzle-loading
shotgun or bow and arrow only)

Giant City State Park

Tuesday--only-during-the-permit-pheasant-season--pheasant-hunting
permitted--two-days-following-close--of--permit--pheasant--season
cocks-only-may-be-taken

Permit Office for permit to hunt a specific day within the statewide season; permits will be allocated by a random drawing; procedures for application and drawing will be announced by news release; permits must be in possession while hunting; only one permit per person per year will be issued; each permit authorizes the holder to bring two three hunting partners; permit must be returned and harvest reported by February 15 or hunters will forfeit hunting privileges for this site for the following year).

release; permits must be in possession while hunting; only one permit per person per year will be issued; each permit authorizes the holder to bring **two** three hunting partners; permit must be returned and harvest reported by February 15 or hunters will forfeit hunting privileges for this site for the following year)

(Waterfowl Permit Area closed)

DEPARTMENT OF CONSERVATION

NOTICE OF ADOPTED AMENDMENT(S)

report harvest; DOC issued back patch must be worn while hunting during the first 2 weekends of the season)

Kidd Lake State Natural Area

Lee County Conservation Area (hunting for rabbit and quail on Monday and Tuesday only during the permit pheasant season); pheasant hunting permitted two days following close of permit pheasant season; cocks only may be taken)

Mackinaw River State Fish and Wildlife Area (opens the day after "Youth Hunt" for 9 consecutive days, rabbit hunting only reopens the third Saturday in December for 9 consecutive days, hunting hours 9:00 a.m. to 4:00 p.m.; daily usage quota filled by daily draw or first-come basis; DOC-issued back patches must be worn while hunting)

Marseilles Fish and Wildlife Area (no hunting during firearm deer season)

Marshall State-Fish-and-Wildlife County Conservation Area (no hunting during firearm deer season)

Mazonia State Fish and Wildlife Area (opens the first day after the close of the Central zone duck season, except closed on Monday and Tuesday; hunting hours 9:00 a.m. - 3:00 p.m.; only shot size of #5 lead or #3 steel or smaller may be used; check in and check out required; hunter quota filled by daily drawing for first five---days day of season); to participate in daily drawing, hunters must check in by 8:30 a.m.; DOC issued backpatch must be worn during first five-days day; after the first five-days day, hunters must sign in and sign out and report harvest; area closes at 3:30 p.m. daily; closed Christmas Day)

McLean County Pheasant Stamp Habitat Area (Open only November 7th
8th--14th--23rd--26th--29th, 6, 7, 11, 13, 19, 21, 24, 27, & 29,
19--and 25; 4, 7, 11, 13, 17, 19, 21 and 24; hunters shall apply
to the Department of Conservation Permit Office for permit to
hunt a specific day within the statewide season; permits will be
allocated by a random drawing; procedures for application and
drawing will be announced by news release; only one permit per
person per year will be issued; permits must be in possession

Kickapoo State Park (8:00 a.m. to 4:00 p.m.; no hunting during firearm deer season; hunters must check in and check out and

NOTICE OF ADOPTED AMENDMENT(S)

while hunting; each permit authorizes the holder to bring two three hunting partners; permit must be returned and harvest reported by February 15 or hunters will forfeit hunting privileges for this site for the following year)

Mermet Lake Conservation Area

Middlefork Fish and Wildlife Area (8:00 a.m. to 4:00 p.m.; no hunting during the firearm deer season; hunters must check in and check out and report harvest; DOC issued back patch must be worn while hunting during the first 2 weekends of the season)

Mississippi River Pools 16, 17, 18, 21, 22, 24, 25 and 26

Moraine View State Park (Wednesday, Thursday, Friday and Saturday only--from--first--Wednesday--after opening of pheasant season--to December 23; hunting hours 8:00 a.m. to 3:00 p.m. each day; daily hunter quota filled on first come, first served basis; hunters must check in and check out at office; no hunting during muzzleloader deer season (December 11-13, 1992)) (hunting will be allowed as announced by the Department)

Mt. Vernon Propagation Center Game Farm (rabbit only; January 2 1 to season's end; daily drawing; check-in/check-out and backpatch required; site permit required; must return harvest report by January 31; maximum shot size 5 lead or 3 steel)

Oakford Conservation Area

Panther Creek Conservation Area

Pike County Conservation Area (no hunting after November 30 in Area A; no hunting after December 15 in Area C)

Pyramid State Park (8:00 a.m. to 4:00 p.m.)

Railsplitter State Park (a pheasant, quail and rabbit hunting program will be conducted 3 days only on November 29 28, and December 12 11 and 13 12, 1992 1993; Railsplitter Upland Game Pheasant, Quail and Rabbit Permits will be issued by a mail-in drawing at the site office. Registration procedures and hunter quota will be announced by public news release. Permits available after the drawing will be allocated on a first-come basis from the site or district Wildlife office. Each permittee must check in at the site office check station between 8:00 a.m. and 8:30 a.m. and exchange his hunting license and Railsplitter Upland Game Permit for a back patch to be worn while in the field. Hunting hours are 8:30 a.m. to 3:00 p.m. Each hunter must check out and report his harvest at the hunter check station

NOTICE OF ADOPTED AMENDMENT(S)

by 4:00 p.m. It is unlawful to hunt in restricted areas)

Ramsey Lake State Park (first-come, first-served-for-daily-hunter quota; 8:00 a.m. to 4:00 p.m.; closed-Christmas-Day-New-Year's Day) (hunting will be allowed as announced by the Department)

Randolph County Conservation Area

Red Hills State Park (8:00 a.m. to statewide close)

Rend Lake Project Lands and Waters

Reckhouse-Creek-(Monroe-County)

Saline County Conservation Area (8:00 a.m. to 4:00 p.m.)

Sam Dale Lake Conservation Area (8:00 a.m. to 4:00 p.m.)

Sam Parr Fish-and-Wildlife-Area State Park (8:00 a.m. to 4:00 p.m.)

Sand Ridge State Forest (hunters must sign out daily and report their harvest)

Sangamon County Conservation Area

Sanganois Conservation Area

Sangchris Lake State Park (a pheasant, quail and rabbit hunting program will be conducted 1-day 2 days only on December 13-1992 12, 1993 and quail-and-rabbit-hunting-program-will-be-conducted one-day-only on December 19-1992 18, 1993; Sangchris Lake Upland Game Pheasant, Quail and Rabbit Permits will be issued by a mail-in drawing at the site office. Registration procedures and hunter quota will be announced by public news release. Permits available after the drawing will be allocated on a first-come basis from the site office. Each permittee must check in at the site office between 8:00 a.m. and 8:30 a.m. and exchange their hunting license and Sangchris Lake Upland Game Permit for a back patch to be worn while in the field. Hunting hours are 8:30 a.m. to 4:00 p.m. Each hunter must check out and report his harvest at the hunter check station by 4:00 p.m. Rabbit hunting only will be permitted at Sangchris Lake State Park from December 20-1992 19, 1993 through December 31 except on Christmas Day; hunter quota will be announced by public news release; daily Sangchris Lake Rabbit Hunting Permits will be issued on a first-come basis at the site office between 8:00 a.m. and 9:00 a.m. on each respective hunting day. Hunters must possess a Sangchris Lake Rabbit Hunting Permit at all times when hunting. Hunting hours

DEPARTMENT OF CONSERVATION

NOTICE OF ADOPTED AMENDMENT(S)

are 8:30 a.m. to 4:00 p.m. Each hunter must check out and report his harvest at the hunter check station by 4:00 p.m.)

Shawnee National Forest, LaRue Scatters (sunrise - noon during the duck season)

Shawnee National Forest, Oakwood Bottoms (Greentree Reservoir, west of the Big Muddy Levee, sunrise - noon during statewide waterfowl duck season; after waterfowl season--statewide--hours; steel non-toxic shot only)

Silver Springs State Park (9:00--a.m.--to--3:00--p.m.--non-fee hunting--pheasant--and--rabbit--opens--and--closes--concurrent--with the--upland--game--season:--Hunt--days--are--Tuesday--Thursday--Saturday--and--Sunday--only:--Site--is--closed--on--Christmas--and--New Years--Day:--Hunt--hours--are--from--9:00--a.m.--to--3:00--p.m.:--Hunters must--check--out--by--3:15--p.m.:--For--the--first--6--hunt--days:--the hunter--quota--will--be--filled--by--a--daily--drawing--held--at--8:30--a.m.: on--those--days:--a--back--patch--will--be--issued--which--must--be--worn during--hunting:--Thereafter:--the--hunter--quota--will--be--first--come first--served--with--daily--sign--in--and--sign--out--required:--only--shot size--of--No. 5--lead--or--No. 3--steel--or--smaller--may--be--used) (hunting will be allowed as announced by the Department)

Site M---band--leased--from--Commonwealth--Edison in Cass County (in designated areas hunting will be allowed on weekends as announced by the Department. Additional regulations will be publicly announced. Hunting is limited to shotgun only in these areas: The--hunter--quota--will--be--announced:--Check--in--time--is--one--half hour--before--sunrise--and--all--hunters--must--check--in--and--out--through the--check--station: Parking is permitted at designated parking areas only)

Snake Den Hollow Fish and Wildlife Area (hunting permitted from the day after the close of the Fulton-Knox County Zone goose season until the close of the statewide rabbit season.

Stephen A. Forbes State Park (8:00 a.m. to 4:00 p.m.)

Sunspot Mine (Fulton and Schuyler Counties)

Tapley Woods State Natural Area (closed during firearm and muzzleloading rifle deer season seasons)

Ten Mile Creek State Fish and Wildlife Area (permit required; areas designated as Refuge are closed to all access during Canada Goose Season only, permits must be returned by February 15 to the District Wildlife Manager, 700B West Lafayette, P.O. Box 313, Olney IL 62450; parking card--must--be--displayed--in--windshield

DEPARTMENT OF CONSERVATION

NOTICE OF ADOPTED AMENDMENT(S)

white-hunting)

Trail of Tears State Forest

Turkey Bluffs Fish and Wildlife Area

Union County Conservation Area (Firing Line Management Area only)

Washington County Conservation Area (drawing at site for hunter quota; 9:00 a.m. to 3:00 p.m.; non-fee hunting open November 20 19 and December 4 2 and Wednesday after the final game bird release and continues until the close of the season, except closed Christmas Day, New Year's Day and Mondays and Tuesdays; only shot size of No. 5 lead or No. 3 steel or smaller may be used)

Weinberg-King State Park

Wildcat Hollow State Forest

Witkowsky State Wildlife Area (no--hunting closed during all firearm and muzzleloading rifle deer seasons).

F) Statewide regulations as provided for in this Part apply at the following sites, with additional regulations in parentheses. In addition, a free permit is required, which is obtained from each site office. Permits must be in possession while hunting. The permit must be returned and harvest reported by February 15 or the hunter will forfeit his hunting privileges at that particular site for the following year.

Clinton Lake State Recreation Area

Eagle Creek State Park

Fox Ridge State Park

Hidden Springs State Forest (no hunting during firearm deer season)

Lake Shelbyville Eagle Creek Wildlife Management Area

(Source: Amended at 17 Ill. Reg. 15534, effective September 10, 1993)

Section 530.115 Regulations for Hunting by Falconry Methods at Various Department-Owned or -Managed Sites

a) All the regulations in 17 Ill. Adm. Code 510 apply in this Section, except that falconers are required to wear a cap and outer garment of

NOTICE OF ADOPTED AMENDMENT(S)

solid and vivid blaze orange only during the upland game season on sites where upland game hunting is in progress.
b) Statewide falconry regulations (17 Ill. Adm. Code 1590) apply at the following sites (exceptions are in parentheses):

AMAX-beased-bands

Horseshoe Lake State Park (Madison County) (hunting season opens the first hunting day after the close of the duck hunting season; hunting by falconry methods allowed from day after controlled pheasant season through the close of statewide quail falconry season)

Mississippi River Pools 16, 17 and 18

Railsplitter State Park (hunting by falconry methods permitted from October 1 through October 31 March 31 or until 10 hen pheasants are harvested; falconers must sign in at the site office check station before hunting and sign out immediately after hunting and report their harvest)

Sand Ridge State Forest (hunting for pheasants, rabbits and quail by falconry methods will be permitted; falconry hunters must obtain a free permit from site office before hunting and report harvest by January 15; failure to report harvest will result in loss of hunting privileges the following year) (Statewide regulations except that hunting is permitted on Mondays and Tuesdays only during the Controlled Daily Drawing Pheasant Program season. It is unlawful to hunt by falconry methods in the vicinity of pheasant releases as pheasants are being released. Falconry hunters must obtain a free permit from site office before hunting and report harvest by April 15. Failure to report harvest by April 15 will result in loss of hunting privileges the following year.)

Silver Springs State Park (hunting for pheasant, rabbit and quail permitted October 1 through two days before the permit pheasant season opens; opening of the site's pheasant season; falconers must obtain a free permit from site office before hunting and report harvest by December 1; failure to report harvest will result in loss of hunting privileges the following year)

Snake Den Hollow Fish and Wildlife Area (hunting permitted from the day after the close of the Fulton-Knox County Zone goose season until the close of the statewide falconry season.)

Sunspot Mine (Fulton and Schuyler Counties)

c) Cock and hen pheasant, Hungarian partridge, bobwhite quail, and rabbit may be taken at the following sites in accordance with 17 Ill. Adm.

Code 1590; falconers must obtain a free permit from site office before hunting and return permit before leaving area; and report harvest must be reported by February 15; failure to return or report harvest will result in loss of hunting privileges the following year (additional site regulations are in parentheses):

Chain O'Lakes State Park (hunting permitted 8:00 a.m. to 4:00 p.m. from the Monday after the non-fee season through January 31 except closed Christmas Day; obtain permit from site office Monday through Friday 8:00 a.m. to 4:00 p.m.)

Eagle Creek State Park (hunting permitted from the end of the statewide firearms season for rabbits through January 31)

Eagle Creek Wildlife Management Area (hunting permitted from the end of the statewide firearms season for rabbits through January 31)

Moraine View State Park (hunting permitted October 1 through two days before the pheasant season opens)

Ten Mile Creek Fish and Wildlife Area (hunting permitted from the end of the statewide firearms rabbit seasons season through January 31)

(Source: Amended at 17 Ill. Reg. 15534, effective September 10, 1993)

Section 530.120 Regulations for Hunting Crow at Various Department-Owned or -Managed Sites

a) Statewide regulations as provided for in this rule for crow hunting apply at the following sites (season--dates exceptions are in parentheses):

AMAX-beased-bands

Mississippi River Pools 16, 17, 18

Panther Creek Conservation Area

Pike County Conservation Area (July 1 through August 15)

Sangamo State Wildlife Area (July 1 through August 15; after waterfowl season closes through March 1; non-toxic shot only)

Sunspot Mine (Fulton and Schuyler Counties)

b) Statewide regulations as provided for in this rule for crow hunting apply, except hunting is permitted only during the second portion of the season at the following sites (season dates are in parentheses):

DEPARTMENT OF HUMAN RIGHTS
NOTICE OF ADOPTED AMENDMENTS

- 1) Heading of the Part: Procedural
- 2) Code Citation: 56 Ill. Adm. Code 2520
- 3) Section Number:

2520.700	Adopted Action:
2520.710	Renumbered, amended
2520.720	Amendment
2520.730	Amendment
2520.740	Renumbered
2530.750	Repealed
2520.760	Amendment
2520.770	Amendment
2520.780	Amendment
2520.790	Amendment
2520.795	Amendment
2520.797	Amendment

Appendix A

- 4) Statutory Authority: Implementing Sections 2-101(B), 2-102(A), 2-103, 2-105, 6-101, 7-105 et seq., and 7A-102, of the Illinois Human Rights Act. (Ill. Rev. Stat. 1991, ch. 68, pars. 2-101(B), 2-102(A), 2-103, 2-105, 6-101, 7-105 et seq., and 7A-102) [775 ILCS 5/2-101(B)], 2-102(A), 2-103, 2-105, 6-101, 7-105 et seq. and 7A-102], the Personnel Code (Ill. Rev. Stat. 1991, ch. 127, par. 127b101 et seq.) [20 ILCS 415], the Intergovernmental Cooperation Act (Ill. Rev. Stat. 1991, ch. 127, par. 741 et seq.) [5 ILCS 220], and Section 202 of the Freedom of Information Act (Ill. Rev. Stat. 1991, ch. 116 par. 202) [5 ILCS 140/2], and authorized by Sections 7-101(A) and 7-105(A) of the Illinois Human Rights Act (Ill. Rev. Stat. 1991, ch. 68, pars. 7-101(A) and 7-105(A)) [775 ILCS 5/7-101(A) and 7-105(A)].
- 5) Effective Date of Rule: September 13, 1993
- 6) Does this rulemaking contain an automatic repeal date: No.
- 7) Does this rulemaking contain incorporations by reference: No.
- 8) Date filed in Agency's principal office: September 1, 1993.
- 9) Notice of proposal published in Illinois Register: January 4, 1993, 17 Ill. Reg. 10.
- 10) Has JCAR issued a Statement of Objection to these rules: No.
- 11) Differences between proposal and final version:

DEPARTMENT OF CONSERVATION
NOTICE OF ADOPTED AMENDMENT(S)

- Anderson Lake Conservation Area (after Waterfowl season closes, but not before December 15, through March 1)
- Big Bend Conservation Area (December 17-15 through March 1)
- Big River State Forest (December 17-15 through March 1)
- ~~Green River State Wildlife Area (see County Conservation Areas) (January 1 through March 1)~~
- Lee County Conservation Area (Green River) (January 1 through March 1)
- Trail of Tears State Forest (December 17-15 through March 1)
- c) All hunters must make a reasonable effort to retrieve all crippled birds. All crows taken must be removed from the site by the hunter.
- (Source: Amended at 17 Ill. Reg. 15534, effective September 10, 1993)

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENTS

1. Section 2520.700 the definition of disability has been deleted and replaced by the following definition:
Disability - As used in Section 2-105(b) of the Act, "disability" means a mental or physical condition (other than pregnancy), lasting six months or longer, that limits the amount or kind of work an individual can perform.
2. Added to Section 2520.700: Numerical Goals. All the language which should have been stricken has been inserted and shown as stricken. The language was inserted and stricken in the second to the last line following the word "action", and reads as follows: "the target date for completion of each action".
3. The new language in Section 2520.730(a) has been underlined. This language is a complete sentence beginning "In order for...the following criteria".
4. In accordance with the JCAR/agency agreement, in Section 2520.730(b) (2), "if required" was inserted before "in accordance with" and "1005.01(a) (5)" was stricken.
5. In Section 2520.770(g), the last sentence should not have showed "the Department of" in the underlying language "The Director of the Department of Central Management Services...". This language was new language, included and stricken by error.
By definition, "Central Management Services" means "The Department of Central Management Services..."
6. In Section 2520.770(h) in the second sentence, a space has been inserted in the phrase "...adverse impact upon minorities,...". This space was inserted between "impact" and "upon". In accordance with the JCAR/agency agreement, "report" was underlined in the first sentence; "it" was stricken after "submitted" in the first sentence; and in the second sentence, "the" was inserted and then stricken after "women or".
7. In Section 2520.780(a) (3) (A), The first sentence, has a space inserted in the phrase "...submit his/her resume and ..." between "his/her" and "resume".

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENTS

8. In accordance with the JCAR/agency agreement, in Section 2520.780(a) (3) (A) "Time" was deleted before "period" in the stricken material.
9. In Section 2520.780(c) (11), the comma has been deleted between "discrimination" and "as".
10. The extra line space has been deleted in Section 2520.790(a). This extra line space was between the first and second lines.
11. In accordance with the JCAR/agency agreement, in Section 2520.790(a), the comma was deleted after "against the agency".
12. In Section 2520.795(a) (2), the hyphen has been deleted in "time-frame" so it is consistent with the rest of the text. "Time-frame" was located between..."goals within the time-frame cited..."
13. In Section 2520.795(b), "as" has been deleted in the phrase "the agency" as "in". This language is found in the second to last line following the word "rate".
14. The caption on Section 2520.795(c) has been corrected to reflect language currently on file. The first publication omitted the last word "Report".
15. In Section 2520.795(c), the labels on A), B), C), and D) have been underlined.
16. In Section 2520.797(b), the reference to "paragraph (a) of this Section" has been corrected to "subsection (a) above". This language is found in the first sentence following "pursuant to... of this Section...". In the fourth sentence, beginning "In addition to sending...posture and practices." the word "shall" has been moved to its proper position following the word "Director" but is still shown as stricken. The word "shall" had been incorrectly placed in the first notice as it was inserted following "Noncompliance", but before "the Director". In accordance with JCAR/agency agreement, "par 201 et seq." was changed to "pars 201 et seq."
17. In Appendix A (Part III) (B) (1) (d) the language following "(d) the" and labor area" was not on file and should not have been stricken. The stricken language following "the" and (d) preceding "total number" has been removed.

ILLINOIS REGISTER
DEPARTMENT OF HUMAN RIGHTS
NOTICE OF ADOPTED AMENDMENTS

18. In Appendix A (Part III) (B) (2) (a) the sentence beginning with "The value weight...EEO job category." has been inserted. This becomes the third sentence following "of this rulemaking." and preceeding "The sum of all value weights....".

19. In Appendix A (Part III) (C) (2) and subsections (a) through (d) have been renumbered to (3) subsections (a) through (d) and a new part (2) has been inserted.

2) Survey: After this subpart has been adopted, employees shall be surveyed to determine the state's utilization of people with disabilities, as defined in section 2520.700. Subsequently hired employees will be surveyed at the time of hire.

20. In Section 2520.730(b) (2), on the second line, the "a" in "Section 5.01(a)" has been stricken and "b" has been added. Also, on the fourth line, paragraph number "1005.01(a) (5)" has been stricken and replaced by paragraph number "1005-40(b) (5)".

21. All ILCS citations have been included.

12) Have all the changes agreed upon by the Agency and JCAR been made as indicated in the agreement letter issued by JCAR?
Yes.

13) Will this rule replace an emergency rule currently in effect? No.

14) Are there any amendments pending on this Part? No.

15) Summary and purpose of the rulemaking:

The sections of the administrative rules which the Department proposes to amend were effective July 1, 1982. Since that time, the Illinois Human Rights Act has been subject to amendments, thus it is appropriate that the rules and regulations be brought up to date.

16) Information and questions regarding these Adopted Amendments shall be directed to:

Denise F. McGuire
Staff Attorney
Illinois Department of Human Rights
100 West Randolph Street
Suite 10-100
Chicago, Illinois 60601
Telephone number: 312-814-6241
T.D.D.: 312-263-1579

The full text of the Adopted Rules begins on the next page:

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT(S)

TITLE 56: LABOR AND EMPLOYMENT
CHAPTER II: DEPARTMENT OF HUMAN RIGHTS

PART 2520
PROCEDURAL

SUBPART A: INTERPRETATIONS

Section

2520.10 Definition of Terms
2520.20 Computation of Time
2520.30 Service of Pleadings
2520.40 Filing with the Department
2520.50 Separability

SUBPART B: RECORDS

Section

2520.110 Preservation of Records by Employers and Labor Organizations

SUBPART C: CHARGE

Section

2520.310 Time of Filing
2520.320 Form
2520.330 Contents
2520.340 Requirements for Charge
2520.350 Acceptance of Charge
2520.360 Amendment
2520.370 Substitution and Addition of Parties
2520.380 Withdrawal of Charge

SUBPART D: PROCEDURE UPON CHARGE

Section

2520.410 Docketing and Service of Charge
2520.420 Maintenance of Records
2520.430 Investigation
2520.440 Fact-Finding Conference
2520.450 Administrative Closure
2520.460 Determination After Investigation
2520.470 Conciliation
2520.480 Complaint

SUBPART E: SETTLEMENTS

Section

2520.510 Terms of Settlement
2520.520 Non-Disclosure

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT(S)

2520.530 Dismissal for Refusal to Accept Settlement Offer
2520.540 Non-Compliance with Settlement Terms

SUBPART F: RELATIONS WITH LOCAL HUMAN RIGHTS AGENCIES

Section

2520.610 Scope and Purpose
2520.620 Definitions
2520.630 Cooperative Agreements
2520.640 Nature of Cooperative Complaint Processing Arrangements
2520.650 Training and Technical Assistance
2520.660 Promotion of Communication and Goodwill

SUBPART G: EQUAL EMPLOYMENT OPPORTUNITY AND AFFIRMATIVE ACTION
BY STATE EXECUTIVE AGENCIES

Section

2520.740 2520.700 Definitions
2520.710 Scope and Purpose
2520.720 Affirmative Action Groups
2520.730 Consideration of Additional Groups
2520.740 Definitions (Renumbered)
2520.750 Nondiscrimination (Repealed)
2520.760 Affirmative-Action Plans
2520.770 Reporting and Record-Keeping
2520.780 Equal Employment Opportunity Officers
2520.790 Complaint Process
2520.795 Compliance Reviews
2520.797 Sanctions for Noncompliance

APPENDIX A Ingredients/Contents of Affirmative Action Plans

APPENDIX B Value Weight Assignment Chart

AUTHORITY: Implementing Sections 2-101(B), 2-102(A), 2-103, 2-105, 6-101, 7-105 et seq., and 7A-102 of the Illinois Human Rights Act (Ill. Rev. Stat. 1991, ch. 68, pars. 2-101(B), 2-102(A), 2-105, 6-101, 7-105 et seq., and 7A-102) [775 ILCS 5/2-101(B), 2-102(A), 2-103, 2-105, 6-101, 7-105 et seq. and 7A-102], the Personnel Code (Ill. Rev. Stat. 1991, ch. 127, par. 127b101 et seq.) [20 ILCS 415], the Intergovernmental Cooperation Act (Ill. Rev. Stat. 1991, ch. 127, par. 741 et seq.) [5 ILCS 220], and Section 202 of the Freedom of Information Act (Ill. Rev. Stat. 1991, ch. 116, par. 202) [5 ILCS 140/2], and authorized by Sections 7-101(A) and 7-105(A) of the Illinois Human Rights Act (Ill. Rev. Stat. 1991, ch. 68, pars. 7-101(A) and 7-105(A)) [775 ILCS 5/7-101(A) and 7-105 (A)].

SOURCE: Adopted November 20, 1972 by the Fair Employment Practices Commission; transferred to the Department of Human Rights by P.A. 81-1216, effective July 1, 1980; emergency amendments at 4 Ill. Reg. 39, p. 335, effective September 17, 1980, for a maximum of 150 days; amended at 5 Ill. Reg. 1627, effective

DEPARTMENT OF HUMAN RIGHTS DEPARTMENT OF HUMAN RIGHTS NOTICE OF ADOPTED AMENDMENT(S)

February 9, 1981; amended at 6 Ill. Reg. 2125, effective February 8, 1982; amended at 6 Ill. Reg. 3076, effective March 15, 1982; amended at 6 Ill. Reg. 8090, effective July 1, 1982; codified at 8 Ill. Reg. 17884; amended at 17 Ill. Reg. 15556, effective September 13, 1993.

SUBPART G: EQUAL EMPLOYMENT OPPORTUNITY AND AFFIRMATIVE ACTION BY STATE EXECUTIVE AGENCIES

Section 2520.740700 Definitions

For purposes of this Subpart, the following terms shall have the meanings indicated:

Act--The term "Act" shall mean the Illinois Human Rights Act.

Affirmative Action Group--The term "affirmative action group" shall mean any of the groups listed in Section Sections 2520-920 2520.720 or 2520.730 of this Part.

Agency--The term "agency" or "State--agency" shall mean any instrumentality or facility of the executive branch of State government, as specified in Section 2520-910 2520.710 of this Part.

Central Management Services--The term "Central Management Services" shall mean the Department of Central Management Services or any successor agency responsible for its functions.

Chief Executive Officer--The term "Chief--executive--officer--Chief Executive Officer" shall mean the director or other chief executive or administrator of any State agency other than the Department--Human Rights.

Department--The term "Department" means the Department of Human Rights.

Director--The term "Director" means the Director of the Department of Human Rights.

Disability--As used in Section 2-105(b) of the Act, "disability" means a mental or physical condition (other than pregnancy), lasting six months or longer, that limits the amount or kind of work an individual can perform.

EEO--The term "EEO" means Equal Employment Opportunity.

EEO/AA--The term "EEO/AA" means Equal Employment Opportunity/Affirmative Action.

EEO Job Categories--The term "EEO job job categories categories" means

used--for--governmental--agencies--in--this--Article, refers to the following eight categories: officials/managers; professionals; paraprofessionals; technicians; office/clerical workers; protective services workers; skilled craft workers; and service/maintenance workers.

EEO Officer--The term "EEO Officer" means the Equal Employment Opportunity Officer, whether full or part-time, appointed by a State agency pursuant to Section 2-105(B)(4) of the Act and Section 2520-980 5220.780 of this Part.

Minority--The term "minority" or "minorities" refers to those groups, or members thereof, listed in Section 2520-920 2520.720 or 2520.730 of this Part, other than women and the-handicapped disabled persons.

Numerical Goals--The term "Numerical-Goals numerical goals" means the number of the members of an affirmative action group which comprise at least 2% of the general population of the state which have been determined to be available to an agency facility for employment in each of the EEO job categories. This availability must be computed according to the methodology described within this Part--Numerical goals must state the number of the members of the affirmative action group to be employed--the actions to be taken to recruit and employ that number--the persons responsible for the implementation of each action--the target date for completion or implementation of each action--and the procedure for monitoring the progress toward meeting the goal.

Petitioning Group--The term "Petitioning--Group petitioning group" means a chartered not-for-profit organization that is recognized by the community it purports to represent which has stated as its purpose the fostering of the interests and well being of the population in question that community.

Plan--The term "plan" shall mean an affirmative action plan for employment as described in Section 2520.760.

Program Goals--The term "Program-Goals program goals" means a set of actions established to solve address affirmative action or EEO problems cited in the agency's plan. Affirmative Action Plan--Program goals must state each action to be taken--the persons responsible for the implementation of the actions--the target date for completion or implementation of each action--and the procedure for monitoring the progress toward meeting the goal.

Reasonable Accommodation--The term "Reasonable-Accommodation reasonable accommodation" as it relates to handicapped disabled employees and applicants means modification to of the work site, work process and/or work schedule that will to enable a handicapped disabled person to

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT(S)

perform the major functions of a specific job; however, such an accommodation cannot impose an undue hardship on the conduct of the business of the employer or labor organization.

Underutilized Category--The term "underutilized category" means one in which the number of employed members of an affirmative action group for which numerical goals have been set does not reflect the availability of that group in the agency workforce in that EEO job category.

(Source: Section 2520.700 renumbered from 2520.740 and amended at 17 Ill. Reg. 15556, effective September 13, 1993)

Section 2520.710 Scope and Purpose

This Part Subpart implements Sections 2-105(B) and 7-105 of the affirmative action provisions of the Illinois Human Rights Act, those Sections of the Act which apply to "every State executive department, State agency, board, commission and instrumentality." (Ill. Rev. Stat. 1991, ch. 68, pars. 2-105(B) and 7-105) [775 ILCS 5/2-105(B) and 7-105]. The Department interprets this language as encompassing all agencies of the executive branch of State government and their corporate outgrowths, including bodies, political and corporate of the State. Agencies of the legislative and judicial branches and local government entities are excluded. This Part Subpart interprets the responsibilities imposed on covered State agencies under Sections 2-105(B) and 7-105 of the Act to practice equal opportunity EEO and affirmative action in employment. This Subpart also describes the methods by which the Department of Human Rights will monitor and assist agencies in complying with those obligations.

(Source: Amended at 17 Ill. Reg. 15556, effective September 13, 1993)

Section 2520.720 Affirmative Action Groups

Section 2-105(B) of the Act requires that State agencies to keep records, analyze their workforces, and establish affirmative action numerical and program goals for employment "by race, national origin as required by Department rules, sex and handicap disability, and any other category which the Department may require by rule" (Ill. Rev. Stat. 1991, ch. 68, par. 2-105(B)) [775 ILCS 5/2-105(B)]. The Act thus recognizes an obligation of the State to specifically address the circumstances of groups which have experienced particularly chronic and pervasive employment discrimination. Under long-standing Federal mandates as well as established practice in Illinois, State agency affirmative action efforts have should focus upon the following groups where each represents at least two percent of the relevant general population: blacks African Americans, women, hispanics Hispanics and Latinos, American Indians and Alaskan Natives, Native Americans, Asians and Pacific Islanders, and the handicapped disabled persons. The Act evinces an

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT(S)

intent to maintain the focus upon each of these groups, and to expand that focus to encompass "national origin" or other groups confronting similar discrimination. The Department will apply the criteria of Section 2520-930 2520.730 of this Part to identify such other groups to be added to the list below. State agencies are presently required to focus upon the following groups for the record-keeping, workforce analysis, and affirmative action efforts mandated under Section 2-105(B) of the Act:

- a) Blacks;
- b) Women;
- c) Hispanics;
- d) American Indians and Alaskan Natives;
- e) Asians and Pacific Islanders;
- f) the handicapped.

(Source: Amended at 17 Ill. Reg. 15556, effective September 13, 1993)

Section 2520.730 Consideration of Additional Groups

Section 2-105(B) of the Act requires that State agencies expand their workforce analyses and affirmative action efforts to include "national origin" as required by Department rule, and also to encompass "other categories" which the Department may require by rule. The intent of this language is to bring within the State's affirmative action focus groups which experience the vestiges of past employment discrimination which is similar in patterns and practices to that which has afflicted the groups listed in Section 2520-920 of this Part:

- a) Criteria to determine the pervasiveness of discrimination which a group has experienced, the Department will consider in order for an affirmative action group to be recognized, a petitioning group must present to the Director the following criteria:

- 1) the relationship between the proportion which of an affirmative action group represents in the general State population and the proportion which it comprises among of the affirmative action group in State employees, and whether or not that proportion is less than 4/5 of the availability of that group in each of the eight EEO categories;
- 2) other authoritative statistical evidence, surveys and studies reflective of the discrimination experienced by the group, particularly, but not exclusively, as they relate to experience in Illinois;
- 3) the frequency with which charges alleging such discrimination, as compared to discrimination against other minorities, have been filed with the Department, its predecessors and other federal and local entities that investigate employment discrimination charges;
- 4) whether or not employment discrimination is longstanding against the group in question was sanctioned and is without an adequate legal remedy which is under color of State law; and

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT(S)

5) evidence of a continuing cycle of discrimination which, without affirmative action, will continue.

b) Consideration Process--For each petitioning group--a Notice of Proposed Rulemaking will be published by the Department in the Illinois Register, and the group will be added or not added under Section 2520.920 of this Part based upon the evidence submitted to and obtained by the Department and submitted by public commenters through the rulemaking process. If the Director determines that the criteria in subsection (a) above have been met and that a petitioning group has submitted a petition as specified in 2 Ill. Adm. Code 925.110 of the Department's Rules:

1) A Notice of Proposed Rulemaking will be published by the Department in the Illinois Register, and the Department will commence rulemaking within 90 days after submission of such a petition.

2) The Department shall convene a hearing, if required, in accordance with Section 5.01(f)(5)(b)(5) of the Illinois Administrative Procedure Act (Ill. Rev. Stat. 1991, ch. 127, par. 1005-03(f)(5) 1005-40(b)(5)) [5 ILCS 100/5-40(b)(5)]. Any group or individual may initiate such rulemaking by petition as specified in 2 Ill. Adm. Code 925.120 of the Department's Rules; the Department will commence such rulemaking within 60 days after submission of such a petition if the petition satisfies 2 Ill. Adm. Code 925.126.

3) If the rulemaking results in the addition of an affirmative action group, each agency shall develop numerical, and program goals shall be developed, utilizing methodology determined to be appropriate by the Department for that group. Affirmative action groups other than the handicapped which comprise at least two percent of the State's general population, this does not, however, deprive groups comprising a lesser percentage of their protection against discrimination under the Act.

(Source: Amended at 17 Ill. Reg. 15556, effective September 13, 1993)

Section 2520.740 Definitions (Renumbered)

(Source: Section 2520.740 renumbered to 2520.700 at 17 Ill. Reg. 15556, effective September 13, 1993)

Section 2520.750 Nondiscrimination (Repealed)

Under Section 2-102(A) of the Act, every State agency regardless of size is required to refrain from discrimination in employment based upon race, color, religion, national origin, ancestry, age from 40 to 70 years, sex, marital status, physical or mental handicap unrelated to ability or unfavorable

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT(S)

(except dishonorable) discharge from military service; this prohibition applies to all aspects of an agency's employment practices including recruitment, hiring, promotion, training, discipline, discharge and any other conditions or privileges of employment. Agencies are further prohibited under Section 2-103 of the Act from inquiring on job applications whether an applicant has ever been arrested, and under Section 6-101(A) of the Act from harassing or retaliating against any person who has reasonably opposed unlawful discrimination or filed, testified or otherwise participated in proceedings under the Act.

(Source: Repealed at 17 Ill. Reg. 15556, effective September 13, 1993)

Section 2520.760 Affirmative Action Plans

a) Adoption and Maintenance--Every State agency shall develop and adopt a written affirmative action plan for employment conforming to the requirements of this Section, and shall review and update the plan at least annually at the beginning of each State fiscal year.

b) Filing and Approval--By September 1 of each not more than sixty (60) days after the beginning of each State fiscal year, every State agency shall file with the Department a complete copy of its affirmative action plan, including any amendments or additions made for that year. If an agency submits a written request for an extension before September 1, the Director may grant an extension of up to 30 days. The request for an extension should state the reason for the extension. The Department will review each agency's plan to determine if it complies with the requirements of this Section. The Department may confer with representatives of the agency and request further information as necessary to make this determination, and the agency may make revisions to its plan as suggested by the Department to achieve compliance. If an agency's plan satisfies the requirements of this Section, it shall be approved by the Director who shall so certify in writing to the agency's Chief Executive Officer. If the Director finds that an agency's plan is deficient with respect to any of the requirements of this Section, the Director shall so inform the agency's Chief Executive Officer in writing specifying the deficiencies and the measures necessary to achieve compliance. The Director shall notify the agency's Chief Executive Officer within 45 days of receipt of the plan whether the plan is approved or disapproved. Within 45 days after receipt of the plan, the Director shall provide to the agency's Chief Executive Officer either a statement indicating that the plan satisfies the requirements of this Section or a statement specifying any deficiencies and the measures necessary to achieve compliance. If, within 30 days thereafter, the agency fails to correct any deficiencies noted by the Director, the Director shall invoke the sanctions provided in Section 2520.937 of this Part for agency noncompliance. Modifications during the course of any fiscal year after an

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT(S)

agency's affirmative action plan has been approved by the Director, the agency proposes to may modify or amend its plan in any fashion the agency shall file by filing with the Department, a copy of the proposed revisions modifications together with a written statement outlining the modifications and the reasons therefor. The modifications shall be reviewed by the Department and approved or disapproved in the same manner as provided in paragraph subsection (b) above.

- d) Ingredients Contents--Every State agency's written affirmative action plan shall include the items specified, and be organized as indicated, in Appendix A of this Part.
- e) Guidelines and Assistance--The Department shall from time to time may promulgate and distribute to agencies manuals and guidelines for the preparation of affirmative action plans in compliance with this Section. Agencies may also obtain technical assistance by contacting the Department's Compliance Division.
- f) Public Disclosure--Upon request, a State agency shall make available for public inspection during normal business hours a copy of its current affirmative action plan.

(Source: Amended at 17 Ill. Reg. 15556, effective September 13, 1993.)

Section 2520.770 Reporting and Record-Keeping

- a) Employment Profiles--As required by Section 2-105(B) of the Act, Each State agency shall maintain data reflecting the composition of its workforce at each geographical location, by race, national origin as specified by the Department, sex and handicap disability, EEO job categories, and any other category which the Department may require by rule. This information shall be collected from the agency's employees through the use of a universal form, developed by the Department of Personnel Central Management Services and approved by the Director, which shall be completed by each employee and applicant for employment at his/her option. The Department of Personnel Central Management Services shall compile this data and furnish periodic quarterly reports to State agencies each agency and the Department depicting the employment profile of each agency under the Personnel Code (Ill. Rev. Stat. 1991, ch. 127, par. 127b101 et seq.) [20 ILCS 415]. Other Other agencies, and agencies under the Code having non-Code employees, shall compile this data themselves and provide it to the Department.
- b) Position Vacancies--Each State agency shall maintain a centralized record detailing all its current and anticipated job openings, and indicating for each such opening the job title, EEO job category, pay grade or merit compensation level, and geographical location. This information shall be supplied to the agency's EEO Officer, and to the Department upon request. Every State agency shall also post conspicuously in its offices all vacancies in nonexempt positions which the agency intends to fill, if the vacant position in which the

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT(S)

vacancy exists is one wherein minorities or females the proportion of incumbents in one or more affirmative action group(s) represent a proportion of all incumbents which is significantly less than the proportion which minorities or females of such group(s) represent in the available local labor force. The posting shall also state that the agency is an Equal Opportunity Employer.

- e) Monthly Reports--When the Department finds that a State agency is not achieving its affirmative action goals and timetables and has not demonstrated a good faith effort to do so or if the volume of charges filed against an agency suggests that the agency may not be complying with its obligations hereunder, the Department may direct that the agency furnish to the Department a monthly report--the monthly report shall list each employment transaction for the month by job title, EEO job category, pay grade or merit compensation level, and the affirmative action group(s) of the employee(s) affected--it this report is not prepared by the agency's EEO Officer, the EEO Officer shall receive a copy of it from the agency.

d) Quarterly Reports--No later than fifteen (15) working days after receipt of the CMS-DHR9 and CMS-DHR10 data information at the end of each fiscal quarter, every State agency shall file with the Department a report. If an agency submits a written request for an extension within 15 working days after receipt of the CMS-DHR10 data information, the Director may grant an extension of up to 15 days. The report, signed by its the EEO Officer and Chief Executive Officer, shall contain:

- 1) A current employment profile of each of the agency's departments or divisions by EEO job category and affirmative action group(s) of the incumbents.
- 2) A breakdown of all employment transactions for the previous quarter by EEO job category and the affirmative action group(s) of the employee(s) affected.
- 3) A statement on the agency's progress or lack thereof in meeting its affirmative action numerical and/or program goals. If a numerical or program goal is not attained, the agency should provide an explanation for the failure to meet the goal.
- 4) A list of vacancies by EEO job category, classification, and pay grade or merit compensation level, that the agency intends to fill during the next quarter. Underutilized positions categories should be indicated. An underutilized position or EEO job category is one in which the number of the employed members of an affirmative action group for which numerical goals have been set does not reflect the availability of that group to the agency or facility workforce in that position or EEO job category.
- 5) A narrative describing all charges and complaints of employment discrimination filed or pending against the agency during the previous quarter. The narrative should identify the facility or geographical location against out of which the charge or complaint was filed; the organization or tribunal with whom it was filed; and the current status of the matter, including

NOTICE OF ADOPTED AMENDMENT(S)

administratively separate subdivisions of agencies with 1,000 or more individuals shall appoint a full-time EEO Officer, subject to the approval of the Department. The Department's approval shall be granted by the Director only, and evidenced in writing signed by the Director to the agency's Chief Executive Officer. The Director of the Department of Personnel or his/her designee shall not complete any personnel transaction regarding the appointment of any agency EEO Officer without written evidence of the approval of that appointment by the Director.

2) The full-time EEO Officer in an agency with 1,000 or more employees shall report directly to the agency's Chief Executive Officer and shall be located on the Chief Executive Officer's administrative staff.

3) When a vacancy occurs in the position of full-time EEO Officer for such an agency, the agency's Chief Executive Officer shall immediately so notify the Director, identifying the agency employee who shall serve as interim EEO Officer.

A) Within thirty (30) days of the occurrence of such vacancy or the expiration of any extension, the Chief Executive Officer shall nominate an individual to fill the vacancy and submit his/her resume and other relevant materials to the Director for approval. The Director may grant an extension of this 30-day period where circumstances legitimately prevent the selection of an appropriate candidate within the period.

B) Within fifteen (15) days of receiving a nomination as above, the Director shall notify the Chief Executive Officer in writing whether the nominee is approved. If not approved, the Director and the Chief Executive Officer may confer to discuss or reevaluate the appointment, and the Chief Executive Officer shall submit another nomination to fill the vacancy. If the Director determines that an agency has not made a good faith effort to nominate an acceptable candidate to fill the position, the Director shall invoke the sanctions for noncompliance provided in Section 2520.797 of this Part.

C) The Director of Central Management Services or his/her designee shall not complete any personnel transaction regarding the appointment of any agency EEO Officer without written evidence of the approval of that appointment by the Director.

D) If not approved, the Director and the Chief Executive Officer may confer to discuss or reevaluate the appointment, and the Chief Executive Officer shall submit another nomination to fill the vacancy.

E) If the Director determines that an agency has not made a concerted effort to fill the position, the Director shall invoke the sanctions for noncompliance provided in Section 2520.797 of this Part.

b) Designation of EEO Officers in Agencies with Fewer Than 1,000

NOTICE OF ADOPTED AMENDMENT(S)

Employees--Every State agency employing fewer than 1,000 individuals shall designate an EEO Officer who said individual may serve as a full-time EEO Officer, or may be responsible for other duties within the agency beyond those of EEO Officer. The Chief Executive Officer of each such agency which has not designated an EEO Officer prior to the effective date of this Part shall do so by in writing to the Director within forty-five (45) days thereafter. When a vacancy occurs in such position, the Chief Executive Officer shall immediately so notify the Director, and identify the employee who shall assume the duties of EEO Officer on an interim or permanent basis.

c) Responsibilities of EEO Officers--Each EEO Officer shall have the following responsibilities, within his/her agency, in addition to those enumerated in the Act or elsewhere in this Part Subpart:

- 1) to develop the agency's affirmative action plan and goals and objectives;
- 2) to assist in identifying and solving EEO problems;
- 3) to design and implement internal audits and reporting systems for measuring the effectiveness of agency programs, indicating need for remedial action, and determining the degree to which the agency's goals and objectives have been attained;
- 4) to serve as liaison between the agency and EEO enforcement authorities;
- 5) to serve as liaison between the agency and minority, women's and handicapped disability organizations;
- 6) to inform management of developments in the EEO field;
- 7) to regularly confer with managers, supervisors and employees to assure that the agency's EEO policies are observed;
- 8) to assist in the evaluation of employees and job applicants so that minorities, women and the handicapped disabled persons are given equal opportunity;
- 9) to advise managers and supervisors whether their if employment practices comply with the Act;
- 10) to describe in the quarterly report to the Department all internal and external complaints of discrimination against the agency;
- 11) to assist in the investigation of internal and external complaints of discrimination as specified in Section 2520.790-2520.799 of this Part;
- 12) at the request of the agency's Chief Executive Officer, to direct agency staff in taking appropriate action to correct for discriminatory practices identified by the Department, and to report to the Chief Executive Officer and the Department on the progress of actions taken;
- 13) in conjunction with the filing of Quarterly Reports, to submit recommendations to the Chief Executive Officer and the Department for improvements to the agency's affirmative action plan;
- 14) to immediately notify the Chief Executive Officer and the Department when unable to resolve employment practices or conditions which have or tend to have disparate adverse impact on

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT(S)

minorities, women or the handicapped disabled persons:
 15) if the agency is in noncompliance, as described in Section 2520.795, to work with Central Management Services to develop programs to train staff in hiring and promotional practices, and to notify the Department of such training.

- d) Protection--An EEO Officer who performs his/her duties as prescribed in the Act and this Part shall not be coerced, intimidated or retaliated against by the agency or any official, employee or agent thereof as a result of such performance. An EEO Officer who believes that he/she has been or is being so coerced, intimidated or retaliated against, or in any other way impeded from the performance of his/her official duties, shall immediately file a charge with the Department. Nothing provided herein shall, however, preclude an agency from disciplining, demoting or discharging an EEO Officer for just cause.

(Source: Amended at 17 Ill. Reg. 15556, effective September 13, 1993)

Section 2520.790 Complaint Process

- a) Internal Complaints--When any agency employee of a State agency complains of employment discrimination against the agency, whether through a grievance under the Personnel Code, a collective bargaining agreement or an internal agency grievance mechanism, the agency's EEO Officer shall be notified of the grievance not later than at the time it reaches the level of the agency's Chief Executive Officer. The EEO Officer shall attend the grievance hearing at that level either as the hearing officer or as a consultant to the hearing officer. If serving as a consultant to the hearing officer, the EEO Officer shall provide a written recommendation to the hearing officer regarding the disposition of the grievance within the timeframe applicable under the grievance mechanism, and the hearing officer shall consider the recommendation in determining the merits of the grievance.
- b) External Complaints--When a charge or complaint alleging employment discrimination against a State agency is filed with the Department, or the U.S. Equal Employment Opportunity Commission or any other governmental agency, the agency shall, having jurisdiction, the agency shall provide a copy of the charge or complaint to the agency's EEO Officer immediately upon being served. The EEO Officer shall then promptly conduct a preliminary investigation, fact-finding conference upon the charge, and make a recommendation to the agency's Chief Executive Officer concerning resolution of the complaint. The EEO Officer shall also participate in any conferences or hearings convened by the enforcement agency with which the charge or complaint is filed, and make recommendations to the agency's Chief Executive Officer or designee for disposition of the matter.

(Source: Amended at 17 Ill. Reg. 15556, effective

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT(S)

September 13, 1993

Section 2520.795 Compliance Reviews

The Department may conduct periodic compliance reviews of any State agency to determine the agency's compliance with the EEO and affirmative action obligations of the Act and this Part-Subpart. In the course of such a review, the Department may request documentation and reports reflecting the agency's employment practices and profile, and may visit the agency's worksite(s) and interview officials and employees.

- a) Compliance Criteria--in the course of a compliance review--the Department shall judge the agency's composite good-faith concerted effort and progress to provide equal employment opportunity and affirmative action for minorities, women and handicapped disabled persons--An agency's compliance will be judged upon, using the following criteria:

- 1) existence of an approved affirmative action plan;
 - 2) demonstration of the implementation of the agency's affirmative action goals within the timeframe cited in the agency's Affirmative Action Plan. In order to be found in compliance with numerical goals, is defined as achieving at least 4/5 of each numerical goal at least 25% of an agency's hires or promotions in EEO job categories for which goals have been developed and cited in the agency's Affirmative Action Plan must be filled in accordance with those goals, and compliance with program goals will be determined by the an agency's documentation that those goals have either been achieved or a demonstration of a good-faith concerted effort to achieve those goals;
 - 3) demonstration that the agency's EEO/AA policy has been disseminated within throughout the agency and to relevant external entities and organizations;
 - 4) documentation of the inclusion of EEO/AA principles and procedures in appropriate in-service training programs;
 - 5) documentation of the inclusion of the agency's EEO Officer in the investigation and disposition of all internal and external discrimination grievances and complaints;
 - 6) maintenance and timely submission of appropriate employment data and reports as required in this Part Subpart and by federal authorities;
 - 7) demonstration in an agency with 1,000 or more employees, documentation of the actual full-time appointment, with the Director's approval, of an EEO Officer in an agency with 1,000 or more employees;
 - 8) documentation of that the actual fulfillment by an agency's EEO Officer of has performed the duties and responsibilities outlined in the Act and this Part-Subpart.
- b) Compliance Report--Within thirty (30) days of the Department's completion of a compliance review of a State agency, the Department will

DEPARTMENT OF HUMAN RIGHTS
NOTICE OF ADOPTED AMENDMENT(S)

shall inform the agency's Chief Executive Officer in writing of the Department's findings. The Department's report shall summarize the agency's satisfaction of the various compliance criteria outlined above, and shall record rate the agency in one of the following compliance categories:

- 1) Certified Compliance: all affirmative action compliance requirements, numerical and programmatic goals have been met by the agency;
- 2) Good-faith Partial Compliance: not all affirmative action compliance requirements, numerical and programmatic goals have been met, but the agency has demonstrated and documented good faith concerted effort efforts to meet its responsibilities; or
- 3) Non-Compliance: affirmative action compliance requirements, numerical and programmatic goals have not been met and the agency has not demonstrated and documented good-faith compliance concerted efforts to meet its responsibilities.

c) Agency Action on Non-Compliance-Report

1) If the Department's compliance report concludes that an agency is in partial compliance or noncompliance, the report shall set forth recommendations and suggestions for the agency to achieve compliance. Within thirty (30) days of receipt of the report, the agency shall inform the Department in writing whether it accepts the Department's recommendations and suggestions.

A) An agency's failure to respond within the thirty (30) days shall be deemed to constitute rejection.

B) Whereif the agency accepts the Department's recommendations, the Department will monitor and periodically evaluate the agency's accomplishment of them.

C) If the agency rejects the Department's recommendations but offers alternatives, of its own within 30 days after their receipt, the Department will review the alternatives and notify the agency if it finds them acceptable within 30 days of their receipt. If the Department finds them acceptable, it will monitor and periodically evaluate the agency's accomplishment of them.

D) If the agency rejects the Department's recommendations and fails to offer acceptable alternatives, the Department will invoke the sanctions for noncompliance provided in Section 2520-997 2520.797 of this Part.

2) Within 30 days after the Department's determination that an agency is in noncompliance, in accordance with Section 7-105 of the Act, the Department will notify the agency and Central Management Services that the agency must "establish necessary training programs for preparation and promotion of the category of individuals affected by the failure", in cooperation with Central Management Services.

3) Whereif the Department finds that an agency is in noncompliance, or if the discrimination charges filed against the agency suggest that the agency may not be complying with its obligations

hereunder, the Department may direct that the agency furnish to the Department a monthly report.

A) The monthly report shall list each employment transaction for the month by job title, EEO job category, pay grade or merit compensation level, geographic region and affirmative action group of the employee affected.

B) After an agency has completed training for failure to meet numerical and program goals, the agency shall describe in its monthly reports the training instituted and how such training was applied, including the number of people in each affirmative action group who applied and who were selected for each employment transaction.

C) If this report is not prepared by the agency's EEO Officer, he or she shall receive a copy of it from the agency.

(Source: Amended at 17 Ill. Reg. 15556, effective September 13, 1993)

Section 2520.797 Sanctions for Noncompliance

a) Show Cause Notice--Whereif a State agency is determined by the Director to have violated or failed to comply with a requirement of this Part Subpart and the agency has not already been afforded an opportunity to respond to or confer with the Department over that determination, the Department shall serve upon the agency's Chief Executive Officer a written notice specifying the nature of the violation or noncompliance. The notice shall provide that the agency may have fifteen (15) days from receipt to respond in writing to the Director setting forth why it should not be deemed in noncompliance, and/or to propose a compromise or resolution of the matter. Within 30 days of its receipt of a timely response, the Department shall review a response which is timely filed it, and if it finds the response is sufficient, may resolve the matter pursuant to written agreement with the agency or by written statement that it will not proceed with the sanctions provided in paragraph (b) of this Section subsection (b) below.

b) Sanctions--If an agency fails to satisfactorily respond to a show cause notice served by the Department in accordance with paragraph subsection (a) of this Section, or if an agency is determined by the Department to have violated or failed to comply with this Part Subpart and has otherwise been afforded an opportunity to respond to or confer with the Department over that determination without an accord being reached, the Department Director shall prepare and send to the agency's Chief Executive Officer a letter of noncompliance over the signature of the Director. The letter shall specify the nature of the violation or noncompliance, and a copy shall be submitted to the Governor. A letter of noncompliance shall be a "public document record", subject to disclosure pursuant to the Freedom of Information Act (Ill. Rev. Stat.

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT(S)

1991, ch. 116, pars. 201 et seq.) [5 ILCS 140]. In addition to sending the Letter of Noncompliance, the Director ~~shall~~ may initiate a charge of a civil rights violation against the agency ~~under~~ pursuant to Section 7(A)-102(A) of the Act, alleging the matters which constitute the agency's noncompliance, and shall cause the Department to conduct an in-depth compliance review of the agency's equal opportunity and affirmative action posture and practices. The Director may also cause judicial proceedings to be commenced against the agency to compel the agency's compliance with the Act and this Part.

(Source: Amended at 17 Ill. Reg. 15556, effective September 13, 1993.)

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT(S)

Section 2520. APPENDIX A Ingredients-Contents of Affirmative Action Plans

Part I

- A. A completed Equal Employment Opportunity/Affirmative Action Certification Form;
- B. An agency EEO/AA policy statement signed by the Chief Executive Officer;
- C. An agency profile statement, describing the mission of the agency and its specific EEO/AA problems and needs;
- D. Identification of the agency's primary EEO Officer and his/her work location and telephone number;
- E. An organizational chart depicting the agency personnel at all levels responsible for implementing and monitoring the agency's affirmative action plan; and
- F. A description of the methods to be used in accomplishing both internal and external dissemination of the agency's affirmative action policy and plan.

Part II

- A. Internal Workforce Analysis: an assessment of the agency's personnel transactions for the previous fiscal year; an analysis of the distribution of present employees separated by code, non-code and combined workforce among the eight EEO job categories; and a breakdown of new hires, promotions, demotions, transfers, terminations, superior performance increases and salary comparisons by affirmative action group; and
- B. External Workforce Analysis: a determination of the number of minorities, ~~who comprise at least two percent of the State's general population, as determined by methodology determined to be appropriate by the Department, and females women and disabled persons available to the workforce of the agency, calculated according to methodology determined to be appropriate by the Department.~~

Part III

- A. Goals and Timetables: Program goals must be developed in conjunction with the problems identified ~~in~~ as the result of the agency's internal and external workforce analyses. Numerical goals must be developed for ~~those affirmative action groups other than the handicapped which comprise at least two percent of the State's general population, utilizing methodology determined to be appropriate by the Department. Each numerical or program goal should include a brief description of the area of concern, objectives which delineate specific intentions, action items outlining steps to be taken to achieve the objectives, the individual responsible for carrying out the action item, and the target date for completion, and the procedure for monitoring the progress toward meeting the goal.~~

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT(S)

B. Methodology for Women and Minorities:

- 1) Factors: Numerical goals are must be determined for each affirmative action group which comprises 2-percent-of-the-general population-of-the-State-of-Illinois by computing the availability of that group to in each of the EEO job categories in the agency workforce using nine-factors--The-nine-factors--which--must--be considered--are considering the total number and the percentage of the affirmative action group:
 - 1-a) the--total--number--and--the--percentage-of--the--affirmative action--group in the population of the State of Illinois;
 - 2-b) the--total--number--and--the--percentage--of--the--affirmative action--group in the-labor-area-surrounding geographic region where the facility is located;
 - 3-c) the--total--number--and--the--percentage--of--the--affirmative action--group in the total workforce in the labor--area geographic region;
 - 4-d) the--total--number--and--the--percentage--of--the--affirmative action--group among those having requisite skills in the geographic region;
 - 5-e) the--total--number--and--the--percentage--of--the--affirmative action--group having the requisite skills in State executive government;
 - 6-f) the--total--number--and--the--percentage--of--the--affirmative action--group among those promotable in the labor area--geographic region;
 - 7-g) the--total--number--and--the--percentage--of--the--affirmative action--group--among of those who are transferable within the labor-area geographic region;
 - 8-h) the--total--number--and--the--percentage--of--the--affirmative action--groupat institutions in the labor-area geographic region providing training in the requisite skills;
 - 9-i) the--total--number--and--percentage--of--the--affirmative--action groupamong those in the labor-area geographic region the agency can train in the requisite skills. Agencies may consider other appropriate factors, if in-addition-to-the above-nine--which--are--appropriate--and approved by the Director.
- 2) The availability of members of each affirmative action group is determined by using the following methodology:
 - 1-a) Each factor is assigned a value weight by the agency facility on a scale of 1% to 100%. The value weight assigned must fall within the parameters found in Appendix B of this rulemaking. The value weight indicates the applicability of each factor to the agency/facility in recruiting employees for that EEO job category. The sum of all value weights must be 100%, representing all persons available to work in a job category.
 - 2-b) Each value weight is multiplied by the percentage of the affirmative action group in each of the factors. The result

DEPARTMENT OF HUMAN RIGHTS

NOTICE OF ADOPTED AMENDMENT(S)

is a weighted factor for each of the nine categories.

3-c) The sum of the nine weighted factors is the availability percentage or ratio for that affirmative action group for that category for the agency/facility. This availability percentage or ratio is applied to the total number of positions in that the agency's EEO job category of--the agency/facility to determine the numerical availability of the affirmative action group in each EEO job category of--the agency-facility.

4-d) The agency/facility must indicate the sources of all its statistics in computing the availability percentage or ratio, and the reason(s) for its weighting value.

C. Methodology for Disabled Persons:

- 1) Factors: A numerical goal must be determined on an agency-wide basis, considering the proportion of people with work disabilities in the Illinois labor force, as reflected in the most recent decennial Census.
- 2) Survey: After this subpart has been adopted, employees shall be surveyed to determine the State's utilization of people with disabilities, as defined in Section 2520.700. Subsequently hired employees will be surveyed at the time of hire.
- 3) Availability: Availability must be determined by using the following methodology:
 - a) The total number of agency employees is multiplied by the percentage of employees with work disabilities in the Illinois labor force (as supplied by the Department);
 - b) CMS will supply the number of agency employees with disabilities by determining the number of employees who disclose such conditions on the latest "Illinois Department of Human Rights Survey for Disabled Employees" form (IL 442-0254);
 - c) The number of employees in 2(b) is subtracted from the result of 2(a);
 - d) If the result of 2(c) is a positive number, the agency must adopt that number as its goal for employing persons with disabilities. If the result of 2(c) is "0" or a negative number, the agency is considered to be at parity with the external labor force.
- D. Monitoring Procedures: a) An outline of the procedures to be used by the agency to determine whether the objectives are met by the dates indicated.

Part IV

Discrimination Complaint Process: a) A description of the procedures established by the agency to address charges of employment discrimination. This Part should include a statement that employees will be advised of their rights to file charges of discrimination with the Department and the U.S. Equal Employment Opportunity Commission.

DEPARTMENT OF INSURANCE
NOTICE OF ADOPTED AMENDMENTS

- 1) Heading of Part: Internal Security Standard and Fidelity Bonds
- 2) Code Citation: 50 Ill. Adm. Code 904
- 3) Section Number: Adopted Action:
904.20 Amended
- 4) Statutory Authority: Implementing and authorized by Section 401 of the Illinois Insurance Code (215 ILCS 5/401)
- 5) Effective Date of Amendment: September 14, 1993
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this amendment contain incorporations by reference? No
- 8) Date filed in Agency's Principal Office: September 10, 1993
- 9) Notice of Proposal Published in Illinois Register:
April 2, 1993, 17 Ill. Reg. 3993
- 10) Has JCAR issued a Statement of Objections to this rule? No
- 11) Difference(s) between proposal and final version: No substantive changes were made.
- 12) Have all changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR?
Yes
- 13) Will this amendment replace an emergency rule currently in effect? No
- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of rulemaking: Pursuant to Section 124.1 of the Illinois Insurance Code (215 ILCS 5/124.1), this amendment will make the sale of securities subject to authorization or ratification by the Board of Directors or a committee thereof.

DEPARTMENT OF HUMAN RIGHTS
NOTICE OF ADOPTED AMENDMENT(S)

Part V

Affirmative Action for the-Handicapped Disabled Persons-

- A. Recruitment Procedures
- B. Application Process Procedures
 - i-1) A review of employment criteria to assure they have no disparate adverse impact upon on employing-handicapped disabled individuals persons;
 - ii-2) Pre-employment pre-employment inquiries--a statement regarding the inadmissibility of inquiries regarding an applicant's handicap disability during the interview process;
 - iii-3) Employment employment testing--(for agencies conducting their own tests)--a statement that--the--agency-will-assure-that-all tests-utilized that the tests do not have a an disparate adverse impact upon on handicapped disabled applicants;
 - iv-4) The prohibition of pre-employment physical medical examination examinations before an offer of employment-unless such-an-examination-is-job-related-and-required-of-all-applicants for-that-position;
- 5) The prohibition of pre-employment medical examinations after an offer of employment, unless such examinations are job related and required of all applicants for that position.
- C. Reasonable Accommodation:
 - i-1) Agency policy committing the agency to providing reasonable accommodations to handicapped disabled employees, signed by the Chief Executive Officer of the agency.
 - ii-2) A description of the procedure to determine reasonable accommodation.
- D. Physical Accessibility for Employment:
 - i-1) Of personnel offices;
 - ii-2) Of the worksite;
 - iii-3) For for evacuation of handicapped-employees disabled persons in emergency situations.

Part VI

Applicable EEO Laws: This Part should set forth the relevant text of any federal law that mandates the agency to adhere to additional EEO/AA requirements.

Appendix: This should include all support data.

(Source: Amended at 17 Ill. Reg. 15556, effective September 13, 1993)

Part VII

DEPARTMENT OF INSURANCE

NOTICE OF ADOPTED AMENDMENTS

- 16) Information and questions regarding this adopted amendment shall be directed to:

Arnie Dutcher
Department of Insurance
320 West Washington
Springfield, Illinois 62767

The full text of the Adopted Amendment begins on the next page.

DEPARTMENT OF INSURANCE

NOTICE OF ADOPTED AMENDMENTS

TITLE 50: INSURANCE

CHAPTER 1: DEPARTMENT OF INSURANCE

SUBCHAPTER 1: PROVISIONS APPLICABLE TO ALL COMPANIES

PART 904

INTERNAL SECURITY STANDARD AND FIDELITY BONDS

Section

- 904.5 Authority and Purpose
- 904.10 Registration of Securities
- 904.20 Custody, Care and Disposition of Securities
- 904.30 Signature of Checks - Facsimile Signatures
- 904.40 Bank Balance Verification
- 904.50 Bond Requirements

AUTHORITY: Implementing and authorized by Section 401 of the Illinois Insurance Code (Ill. Rev. Stat. 1991, ch. 73, par. 1013) [215 ILCS 5/401].

SOURCE: Filed October 15, 1971; amended at 2 Ill. Reg. 29, p. 161, effective July 17, 1978; codified at 6 Ill. Reg. 12461; amended at 16 Ill. Reg. 12561, effective July 27, 1992; amended at 17 Ill. Reg. 15584, effective September 14, 1993.

Section 904.20 Custody, Care and Disposition of Securities

- a) Transfer, sale, assignment or disposition of any security belonging to any such company, other than upon the surrender thereof for payment at maturity or under an option of the maker thereof to repay the same shall first-have-been be authorized or ratified by the Board of Directors, or by a committee thereof charged with the duty of supervising investments and loans.
- b) Any instrument for the assignment, sale, transfer or disposition of any such securities and all checks or other orders for disbursement of funds of the company in connection with the purchase of any such securities, shall require the signature of at least two officers or employees who shall have been so authorized by the Board of Directors, or by a committee thereof charged with the duty of supervising investments and loans.
- c) Access to any and all vaults or other repositories on the premises of any company containing securities of the company and access to any safe deposit boxes containing such securities shall be limited to officers

DEPARTMENT OF INSURANCE

NOTICE OF ADOPTED AMENDMENTS

and employees designated by the Board of Directors and such designation shall require that at least two of the persons so designated shall be present at the time of entry and during the access to such vault, repository or safe deposit box.

(Source: Amended at 17 Ill. Reg. 15584, effective September 14, 1993)

STATE OF ILLINOIS
ILLINOIS STATE LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENTS

- | | |
|---|------------------------|
| 1) <u>HEADING OF THE PART:</u> General Procedures | <u>ADOPTED ACTION:</u> |
| 2) <u>CODE CITATION:</u> 80 Ill. Adm. Code 1200 | Amendment |
| 3) <u>SECTION NUMBERS:</u> | Amendment |
| 1200.10 | Amendment |
| 1200.20 | Repealed, New |
| 1200.30 | Amendment |
| 1200.40 | Amendment |
| 1200.50 | Amendment |
| 1200.60 | Amendment |
| 1200.80 | Amendment |
| 1200.90 | Amendment |
| 1200.110 | Amendment |
| 1200.120 | Amendment |
| 1200.130 | Amendment |
| 1200.140 | Amendment |
| 1200.150 | Amendment |

4) STATUTORY AUTHORITY:

Illinois Public Labor Relations Act (Ill. Rev. Stat. 1991, ch. 48, pars. 1601 et seq.) [5
LCS 315 (1992)].

- 5) EFFECTIVE DATE OF AMENDMENTS: September 13, 1993
- 6) DOES THIS RULEMAKING CONTAIN AN AUTOMATIC REPEAL DATE? No
- 7) DO THESE AMENDMENTS CONTAIN INCORPORATIONS BY REFERENCE? No
- 8) DATE FILED IN AGENCY'S PRINCIPAL OFFICE: August 26, 1993
- 9) NOTICE OF PROPOSAL PUBLISHED IN ILLINOIS REGISTER:
March 26, 1993, 17 Ill.Reg. 3703
- 10) HAS JCAR ISSUED A STATEMENT OF OBJECTIONS TO THESE RULES? No

STATE OF ILLINOIS
ILLINOIS STATE LABOR RELATIONS BOARD
NOTICE OF ADOPTED AMENDMENTS

- 11) DIFFERENCES BETWEEN PROPOSAL AND FINAL VERSION: None
- 12) HAVE ALL THE CHANGES AGREED UPON BY THE AGENCY AND JCAR BEEN MADE AS INDICATED IN THE AGREEMENT LETTER ISSUED BY JCAR? Yes
- 13) WILL THESE AMENDMENTS REPLACE AN EMERGENCY RULE (AMENDMENT, REPEALER) CURRENTLY IN EFFECT? No
- 14) ARE THERE ANY AMENDMENTS PENDING ON THIS PART? No
- 15) SUMMARY AND PURPOSE OF AMENDMENTS:
The amendments to this Part were made in order to relieve any hardship imposed on parties located away from the cities the Boards' offices are located, to provide a formal and uniform procedure for requesting postponements and to clearly articulate the authority of administrative law judges. The rest of the amendments make technical and grammatical corrections.
- 16) INFORMATION AND QUESTIONS REGARDING THESE ADOPTED AMENDMENTS SHALL BE DIRECTED TO:

Lydia Mills Wendt
Deputy General Counsel
Illinois State Labor Relations Board
320 West Washington Street, Suite 500
Springfield, IL 62701

THE FULL TEXT OF THE ADOPTED AMENDMENTS BEGINS ON THE NEXT PAGE:

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

TITLE 80: PUBLIC OFFICIALS AND EMPLOYEES

SUBTITLE C: LABOR RELATIONS

CHAPTER IV: ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

PART 1200

GENERAL PROCEDURES

Section	
1200.10	Definitions
1200.20	Filing and Service of Documents
1200.30	Computation and Extensions of Time
1200.40	Authority of Administrative Law Judges Hearing-Officers
1200.50	Recording of Hearings
1200.60	Oral Argument and Briefs
1200.70	Representation of Parties
1200.80	Ex Parte Communications
1200.90	Subpoenas
1200.100	Transfer of Jurisdiction
1200.105	Consolidation of Proceedings
1200.110	Amicus Curiae Briefs
1200.120	Voluntary Settlement or Adjustment of Disputes
1200.130	Rules of Evidence
1200.140	Declaratory Rulings
1200.150	Conflicts of Interest
1200.160	Variances and Suspensions of Rules

AUTHORITY: Implementing and authorized by the Illinois Public Labor Relations Act (Ill. Rev. Stat. 1991, ch. 48, pars. 1601 et. seq.) [5 ILCS 315].

SOURCE: Emergency rule adopted at 8 Ill. Reg. 17314, effective September 11, 1984, for a maximum of 150 days; adopted at 9 Ill. Reg. 1846, effective January 25, 1985; amended at 11 Ill. Reg. 6428, effective March 27, 1987; amended at 12 Ill. Reg. 20096, effective November 18, 1988; amended at 14 Ill. Reg. 19896, effective November 30, 1990; amended at 17 Ill. Reg. 15588, effective September 13, 1993.

Section 1200.10 Definitions

- a) The term "Act" shall mean the Illinois Public Labor Relations Act (Ill. Rev. Stat. 1989 1991, ch. 48, pars. 1601 et seq.) [5 ILCS 315].
- b) This part incorporates the definitions contained in Section 3 of the Act.
- b)(c) The term "Board" shall refer to the Illinois State Labor Relations Board and the Illinois Local Labor Relations Board of each Board individually as applicable, or an agent designated by the Board.
- c)(d) The term "charging party" shall mean the person who files an unfair labor practice charge.

NOTICE OF ADOPTED AMENDMENT(S)

- d) The term "respondent" shall mean the party named in an unfair labor practice charge or complaint as having allegedly committed the unfair labor practice.
- e) The term "complaint" shall mean a Board document issued to the parties in an unfair labor practice proceeding, notifying them of a hearing and setting forth the issues of fact or law to be resolved at the hearing.
- f) An administrative law judge's hearing officer's recommended opinion or decision and order is not a final decision of the Board, but rather a recommended opinion in the name of the administrative law judge-hearing officer, setting forth findings of fact and conclusions of law and reasons therefor. Such a recommended opinion or decision and order will be reviewed by the Board upon the filing of exceptions or on the Board's own motion.
- g) The use of the masculine pronoun shall refer to both genders.
- h) An Executive Director's Report is a report concerning challenges and/or objections to an election. Such a report shall be reviewed by the Board upon the filing of an appeal by a party. Such reports are not intended to be final decisions of the Board, but rather contain the results of investigations and a determination regarding the existence of questions of law or fact sufficient to warrant a hearing. An Executive Director's Dismissal is a document which indicates that no questions of law or fact exist sufficient to warrant a hearing.

(Source: Amended at 17 Ill. Reg. 15588, effective September 13, 1993)

Section 1200.20 Filing and Service of Documents

- a) All charges, petitions, mediation requests and other initial documents relating to any proceeding before the Illinois State Labor Relations Board shall be filed in the Board's Springfield office, which office shall be designated as the State Board's principal office. All subsequent documents shall be filed in either the Board's Springfield or Chicago office, as directed by the Board. All documents relating to any proceeding before the Illinois Local Labor Relations Board shall be filed with the Board's office in Chicago which shall be designated as the Local Board's principal office. Two copies of each document shall be filed.
- b) Whenever these rules require that a document be on a form developed by the Board, the document may be prepared on a form obtained from the Board or on a facsimile thereof. Minor deviations in the form of a document shall not be grounds for objecting to the document. Minor deviations are those concerning form rather than substance which therefore do not prejudice the other parties to a proceeding.
- c) All petitions, unfair labor practice charges, intervening claims and amendments thereto except as otherwise provided in this part, all initial proceedings or documents in a matter before the Board shall be

NOTICE OF ADOPTED AMENDMENT(S)

- d) served on the appropriate parties by the Board by certified mail, except as otherwise provided. All documents, except those listed in Subsection (c) above, shall be served by the party filing the document on the appropriate all other parties to the proceedings. Evidence submitted to the Board in the course of an investigation shall not be subject to this requirement. When a party is represented in a proceeding before the Board, service shall be on the party's representative. When a party is not represented, service shall be on the party. The document shall be accompanied by proof of service. Proof of service shall consist of a written statement, signed by the party effecting service, detailing the name of the party served and the date and manner of service.
- e) In all matters, a document shall be considered filed with the Boards on the date that it is postmarked, tendered to a delivery service or received by personal delivery in the office of the appropriate Board. However, in cases of filing of exceptions to an administrative law judge's recommended decision and order, responses thereto and briefs in connection therewith, where the filing period has been extended pursuant to the request of a party, the document shall be considered filed with the Boards on the date that it is received by the appropriate Board.
- f) Unless specifically requested by the Board or its agent, the filing of documents with the Board by electronic transmission, such as telefax machine or computer modem, shall not be accepted.

(Source: Amended at 17 Ill. Reg. 15588, effective September 13, 1993)

Section 1200.30 Computation and Extensions of Time

- a) In computing any period of time prescribed by the Act or this Part, the day of the act, event, or default after which the designated period of time begins to run shall not be included. The last day of the period so computed shall be included. If the last day falls on a Saturday, Sunday, or legal holiday, the time period shall be automatically extended to the next day that is not a Saturday, Sunday or legal holiday.
- b) When a time period prescribed under the Act or these rules is less than seven days, intervening Saturdays, Sundays, or legal holidays shall not be included.
- c) Service of a document upon a party by mail shall be presumed complete three days after mailing, if proof of service shows the document was properly addressed. This presumption may be overcome by the addressee, with evidence establishing that the document was not delivered or was delivered at a later date. A party's failure to accept or claim a document served by mail shall not be grounds overcoming the presumption.
- d) Requests for postponements of hearings, investigations or conferences

NOTICE OF ADOPTED AMENDMENT(S)

scheduled by the Board or its agents or extensions to the filing of briefs, exceptions or responses must be made prior to the then existing deadlines and will not be granted unless good and sufficient cause is shown and the following requirements are met:

- 1) the requests must be in writing directed to the investigator, administrative law judge, Executive Director or General Counsel responsible for the proceeding;
- 2) the grounds for the request must be set forth in detail;
- 3) the requesting party must specify alternate days for scheduling the hearing or conference or for the due date of any documents;
- 4) the position of all parties concerning both the postponement or extension requested and proposed alternate dates must be ascertained in advance by the requesting party and set forth in the request;
- 5) for purposes of this Section, good and sufficient cause may include a showing to the satisfaction of the Board or its agents that a postponement or extension will result in settlement of the case;
- 6) except for good cause shown, no request for postponement will be granted on any of the three days immediately preceding the date of a hearing, investigation or conference;
- d) Extensions of time will be granted only upon timely application to the Board or the presiding hearing officer, and only upon the showing of a good cause;
- e) In all matters, a document shall be considered filed with the Board on the date that it is received by the Board.

(Source: Amended at 17 Ill. Reg. 1558, effective September 13, 1993.)

Section 1200.40 Authority of Administrative Law Judges Hearing Officers

The administrative law judge shall have the duty to conduct a fair hearing, to take all necessary action to avoid delay, to maintain order and to ensure development of a clear and complete record. The administrative law judge shall have all powers necessary to these ends including (but not limited to) the authority to:

- a) Hold pre-hearing conferences for settlement, simplification of the issues or any other related purposes;
- b) Regulate the proceedings of the case, and the conduct of the parties and their counsel;
- c) Administer oaths and affirmations;
- d) Receive relevant testimony and evidence;
- e) Examine witnesses and direct witnesses to testify;
- f) Issue subpoenas and file upon motions to revoke subpoenas;
- g) Rule on objections, motions and questions of procedure;
- h) Authorize the submission of briefs and set the time for the filing thereof;

NOTICE OF ADOPTED AMENDMENT(S)

- j) Hear oral argument;
 - j) Render and serve the recommended decision and order on the parties to the proceeding;
 - k) Carry out the duties of administrative law judge as provided or otherwise authorized by these rules and regulations or the Act;
- Whenever the Board appoints a hearing officer to preside over a matter, the hearing officer shall have the authority to do any or all of the following:
- a) dispose of procedural requests, motions, or similar matters;
 - b) continue or adjourn a hearing to a later date;
 - c) grant applications for subpoenas, subpoena witnesses and/or documents; administer oaths and affirmations; examine witnesses; receive relevant testimony and evidence; rule upon offers of proof, and introduce into the record relevant evidence;
 - d) take official notice of generally recognized facts; and
 - e) generally regulate the course of a hearing.

(Source: Section repealed, new Section added at 17 Ill. Reg. 1558, effective September 13, 1993.)

Section 1200.50 Recording of Hearings

Whenever a representation hearing, unfair labor practice hearing, strike investigation hearing or similar hearing is held by the Board or its administrative law judge hearing officer under the Act or these rules, it shall be recorded by stenographic or other means which adequately preserves the record. The administrative law judge hearing officer or the Board may order that the recording be transcribed. Parties may order transcripts and shall bear the costs of any transcripts that they order.

(Source: Amended at 17 Ill. Reg. 1558, effective September 13, 1993.)

Section 1200.60 Oral Argument and Briefs

A party is entitled upon request to a reasonable period of time at the close of the hearing for oral argument, which shall be made part of the record. A party is entitled, upon request made before the close of the hearing, to file a brief with the administrative law judge hearing officer, who may fix a reasonable time for the filing based upon the nature of the proceedings and the particular issues. The Board or the administrative law judge hearing officer shall direct the filing of briefs when the filing is, in the opinion of the Board or administrative law judge hearing officer, warranted by the nature of the proceedings or the particular issues involved. All briefs, whether filed with the Board or a hearing officer, administrative law judge, shall be no more than 50 pages, including attachments. Briefs longer than 50 pages, will not be accepted, unless prior approval has been granted by the administrative law judge hearing officer or the General Counsel. Such approval will only be granted in extraordinary circumstances (e.g., in cases involving extremely

ILLINOIS REGISTER

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

complex issues, in cases involving factual or legal issues of first impression, or in cases involving a lengthy factual record).

(Source: Amended at 17 Ill. Reg. 15588, effective September 13, 1993)

Section 1200.80 Ex Parte Communications

No party may engage in any ex parte communications with a an administrative law judge hearing-officer or with any member of the Board regarding matters pending before the Board.

(Source: Amended at 17 Ill. Reg. 15588, effective September 13, 1993)

Section 1200.90 Subpoenas

a) Following the issuance of a complaint for hearing or a notice of representation hearing, the Board shall have the power to issue subpoenas upon written application of a party. The Board or the administrative law judge hearing-officer may require the party requesting issuance of subpoenas to demonstrate, among other factors, that the request is reasonably required to carry out the proceedings before the Board. The application shall contain the name and address of the party and its representative, and the name of the person to be subpoenaed, and a description of any documents to be produced, and the date, time and place of the appearance to be commanded. The date and time may be prior to the hearing when the application seeks to subpoena documents only. Applications seeking to subpoena documents must be filed with the Board at least five days prior to the date on which the documents are to be produced and at least five days prior to the date of the hearing.

b) A person objecting to the subpoena may file a motion to revoke the subpoena. Grounds for revocation shall include irrelevance, burdensomeness and privilege. The motion must be filed no later than five days after service of the subpoena.

c) Subpoenas in impasse proceedings shall be handled in accordance with 80 Ill. Adm. Code 1230.90(d). Motions to revoke the subpoena in such proceedings shall be filed with the arbitrator or fact-finder.

d) Witnesses appearing at a hearing pursuant to subpoena are entitled to the same fees and mileage as are allowed witnesses in civil cases in the courts of the State of Illinois, pursuant to Section 47 of "AN ACT concerning fees and salaries, and to classify the several counties--of the state--with--reference--thereto" Part 4 of the Fees and Salaries Act: (Ill. Rev. Stat. 1989 1991, ch. 53, par. 65) [55 ILCS 45/47]. The party at whose request the subpoena was issued shall be responsible for service of the subpoena and for ensuring that witness fees and mileage are paid.

ILLINOIS REGISTER

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

e) Board employees shall not be subpoenaed.

(Source: Amended at 17 Ill. Reg. 15588, effective September 13, 1993)

Section 1200.110 Amicus Curiae Briefs

The Board will accept timely-filed amicus curiae briefs in its proceedings. The right-to-file filing of such briefs shall not serve to postpone or delay the proceedings.

(Source: Amended at 17 Ill. Reg. 15588, effective September 13, 1993)

Section 1200.120 Voluntary Settlement or Adjustment of Disputes

The Board, as a matter of policy, encourages the voluntary efforts of the parties to settle or adjust disputes involving issues of representation, unfair labor practices, and interest and rights disputes. Any such efforts at resolution or conciliation and any resulting settlements shall be in compliance with the provisions, purposes and policies of the Act. to--this--end--in--any proceeding--conducted--pursuant--to--the--Act--all--interested--parties--shall--have--an opportunity--to--submit--factors--arguments--offers--of--settlement--and--proposals--of adjustment--to--the--Board--or--its--designated--hearing-officer--for--consideration. Any facts, admissions against interest, offers of settlement or proposals of adjustment which have been submitted pursuant to this Section shall not be used as evidence of an admission of a violation of the Act.

(Source: Amended at 17 Ill. Reg. 15588, effective September 13, 1993)

Section 1200.130 Rules of Evidence

Considering the nature of the case and the representatives of the parties, the administrative law judge hearing-officer will, insofar as practicable, apply the rules of evidence applicable in Illinois courts.

(Source: Amended at 17 Ill. Reg. 15588, effective September 13, 1993)

Section 1200.140 Declaratory Rulings

Parties may petition the Board's General Counsel for a declaratory ruling, pursuant to Section 9 5-150 of the Illinois Administrative Procedure Act (Ill. Rev. Stat. 1989 1991, ch. 127, par. 1009 5-150) [5 ILCS 100/5-150] as follows:

a) In general, public employee bargaining units covered by 80 Ill. Adm. Code 1230. Subpart C, if, after the commencement of negotiations and before reaching agreement, the exclusive representative and the

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

employer have a good faith disagreement over whether the Act requires bargaining over a particular subject or particular subjects, they may jointly petition for a declaratory ruling concerning the status of the law.

1) The petition must be signed by both parties and must contain the name, address, telephone number and person to contact for each party, the date negotiations began, a statement of the legal issue on which a declaratory ruling is sought, and a copy of the most recently negotiated contract, if any.

2) Declaratory rulings shall not be issued concerning factual issues that are in dispute.

3) Each party shall file a brief no later than 10 days after the filing of the petition.

4) Any party desiring oral argument shall request oral argument in writing prior to or at the time of the filing of its brief. Oral argument shall be held no later than seven days after the filing of the briefs.

5) The General Counsel shall issue a declaratory ruling no later than 30 days after the filing of the petition.

6) The parties shall continue to have a duty to bargain in good faith during the pendency of a declaratory ruling petition. The pendency of a declaratory ruling petition shall not stay the running of the 60 and 30 day notice periods provided in 80 Ill. Adm. Code 1230.140(a), (b), and (c). Nor shall the pendency of a declaratory ruling petition stay the running of the five day notice of intent to strike required under Section 17(a)(5) of the Act.

b) In protective service employee bargaining units covered by 80 Ill. Adm. Code 1230. Subpart B, if, after the commencement of negotiations and before reaching agreement, the exclusive representative and the employer have a good faith disagreement over whether the Act requires bargaining over a particular subject or particular subjects, they may jointly petition for a declaratory ruling concerning the status of the law. If a request for interest arbitration has been served in accordance with 80 Ill. Adm. Code 1230.70 and either the exclusive representative or the employer has requested the other party to join it in filing a declaratory ruling petition and the other party has refused the request, the requesting party may file the petition on its own, provided that the petition is filed no later than the first day of the interest arbitration hearing.

1) A joint petition must be signed by both parties. A petition filed by only one party must contain a statement that the other party has refused a request to join in the petition, and must contain a copy of the request for interest arbitration. All petitions must contain the name, address, telephone number and person to contact for each party, the date negotiations began, a statement of the legal issue on which a declaratory ruling is sought, and a copy of the most recently negotiated contract, if

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

any.
2) Declaratory rulings shall not be issued concerning factual issues that are in dispute.

3) The Board shall serve a copy of a petition filed by only one party on the other party. Each party shall file a brief no later than 10 days after the filing of a joint petition, or no later than 10 days after the service of a petition filed by only one party.

4) Any party desiring oral argument shall request oral argument in writing prior to or at the time of the filing of its brief. Oral argument shall be held no later than seven days after the filing of the briefs.

5) The General Counsel shall issue a declaratory ruling no later than 30 days after the filing of the petition.

6) The parties shall continue to have a duty to bargain in good faith during the pendency of a declaratory ruling petition. The pendency of a declaratory ruling petition shall not stay mediation or interest arbitration proceedings required under the Act.

(Source: Amended at 17 Ill. Reg. 15588, effective September 13, 1993)

Section 1200.150 Conflicts of Interest

No person who has been a Board member or an employee of the Board shall engage in practice before the Board or its agents in any respect in connection with any case or proceeding which was pending during the person's his membership on or employment with the Board.

(Source: Amended at 17 Ill. Reg. 15588, effective September 13, 1993)

STATE OF ILLINOIS
ILLINOIS STATE LABOR RELATIONS BOARD
NOTICE OF ADOPTED AMENDMENTS1) HEADING OF THE PART: Impasse Resolution2) CODE CITATION: 80 Ill. Adm. Code 12303) SECTION NUMBERS:1230.10
1230.80
1230.90
1230.150
1230.160
1230.180
1230.190
1230.220ADOPTED ACTION:Amendment
Amendment
Amendment
Amendment
Amendment
Amendment4) STATUTORY AUTHORITY:

Illinois Public Labor Relations Act (Ill. Rev. Stat. 1991, ch. 48, pars. 1607, 1612, 1613, 1617, 1618 and 1605(i) and (j).) [5 ILCS 315/7, 12, 13, 17, 18 and 5(i) and (j) (1992)].

5) EFFECTIVE DATE OF AMENDMENTS: September 13, 19936) DOES THIS RULEMAKING CONTAIN AN AUTOMATIC REPEAL DATE? No7) DO THESE AMENDMENTS CONTAIN INCORPORATIONS BY REFERENCE? No8) DATE FILED IN AGENCY'S PRINCIPAL OFFICE: August 26, 19939) NOTICE OF PROPOSAL PUBLISHED IN ILLINOIS REGISTER:

March 26, 1993, 17 Ill.Reg. 3718

10) HAS JCER ISSUED A STATEMENT OF OBJECTIONS TO THESE RULES: No11) DIFFERENCES BETWEEN PROPOSAL AND FINAL VERSION: NoneSTATE OF ILLINOIS
ILLINOIS STATE LABOR RELATIONS BOARD
NOTICE OF ADOPTED AMENDMENTS12) HAVE ALL THE CHANGES AGREED UPON BY THE AGENCY AND JCER BEEN MADE AS INDICATED IN THE AGREEMENT LETTER ISSUED BY JCER? Yes13) WILL THESE AMENDMENTS REPLACE AN EMERGENCY RULE (AMENDMENT, REPEALER) CURRENTLY IN EFFECT? No14) ARE THERE ANY AMENDMENTS PENDING ON THIS PART? No15) SUMMARY AND PURPOSE OF AMENDMENTS:

Technical changes to make this Part gender neutral and correct statutory citations.

16) INFORMATION AND QUESTIONS REGARDING THESE ADOPTED AMENDMENTS SHALL BE DIRECTED TO:Lydia Mills Wendt
Deputy General Counsel
Illinois State Labor Relations Board
320 West Washington Street, Suite 500
Springfield, IL 62701THE FULL TEXT OF THE ADOPTED AMENDMENTS BEGINS ON THE NEXT PAGE:

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

TITLE 80: PUBLIC OFFICIALS AND EMPLOYEES

SUBTITLE C: LABOR RELATIONS

CHAPTER IV: ILLINOIS STATE LABOR RELATIONS BOARD/

ILLINOIS LOCAL LABOR RELATIONS BOARD

PART 1230

IMPASSE RESOLUTION

SUBPART A: STATEMENT OF PURPOSE AND DEFINITIONS

Section

1230.10 General Statement of Purpose
1230.20 Definitions

SUBPART B: IMPASSE PROCEDURES FOR PROTECTIVE SERVICES UNITS

Section

1230.30 General Purpose of this Subpart
1230.40 Filing of Contracts
1230.50 Bargaining Notices for Protective Services Units
1230.60 Mediation
1230.70 Demand for Compulsory Interest Arbitration
1230.80 Composition of the Arbitration Panel
1230.90 Conduct of the Interest Arbitration Hearing
1230.100 The Arbitration Award
1230.110 Employer Review of the Award

SUBPART C: IMPASSE PROCEDURES FOR GENERAL PUBLIC EMPLOYEE UNITS

Section

1230.120 General Purpose of this Subpart
1230.130 Filing of Contracts
1230.140 Bargaining Notices for General Public Employee Units
1230.150 Mediation
1230.160 Fact-finding
1230.170 Voluntary Interest Arbitration
1230.180 Strikes
1230.190 Petitions for Strike Investigations

SUBPART D: GRIEVANCE ARBITRATION AND MEDIATION

Section

1230.200 Grievance Arbitration
1230.210 Grievance Mediation

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

SUBPART E: ILLINOIS PUBLIC EMPLOYEE MEDIATION/ARBITRATION ROSTER

Section

1230.220 Mediation/Arbitration Roster

AUTHORITY: Implementing Sections 7, 12, 13, 17 and 18 and authorized by Section 5(i) and (j) of the Illinois Public Labor Relations Act (Ill. Rev. Stat. 1991, ch. 48, pars. 1607, 1612, 1613, 1617, 1618, 1605(i) and (j)) [5 ILCS 315/7, 12, 13, 17, 18, 5(i) and (j)].

SOURCE: Emergency rule adopted at 8 Ill. Reg. 17322, effective September 11, 1984, for a maximum of 150 days; adopted at 9 Ill. Reg. 1857, effective January 25, 1985; Part repealed, new Part adopted at 11 Ill. Reg. 6434, effective March 27, 1987; amended at 12 Ill. Reg. 20102, effective November 18, 1988; amended at 14 Ill. Reg. 19903, effective November 30, 1990; amended at 17 Ill. Reg. 15599, effective September 13, 1993.

SUBPART A: STATEMENT OF PURPOSE AND DEFINITIONS

Section 1230.10 General Statement of Purpose

a) In creating this Part it is the Illinois State and Local Labor Relations Boards' ("Board") intent to be cognizant of the interests of labor organizations, public employers and employees, and the general public in assuring stable labor relations in the public sector. In pursuit of this objective, it is incumbent upon both labor organizations and public employers to adhere to and comply with the rules and regulations set forth herein, particularly those provisions which set forth time periods and those provisions which set forth requirements for filing, with the Board, contracts, bargaining notices and other documents.

b) The regulations contained in this Part detail the procedures for giving required notices during collective bargaining, for resolving impasses in collective bargaining, for making appointments to the Illinois Public Employees Mediation/Arbitration Roster, and for the selection of mediators, fact-finders and arbitrators from the Roster. The regulations in this Part implement the policies of the Illinois Public Labor Relations Act ("Act") (Ill. Rev. Stat. 1989 1991, ch. 48, pars. 1601 et seq.) [5 ILCS 315] to provide peaceful and orderly procedures to protect the rights of public employers, public employees, labor organizations and the general public, to prevent labor strife and to protect the public health and safety.

(Source: Amended at 17 Ill. Reg. 15599, effective September 13, 1993.)

Section 1230.80 Composition of the Arbitration Panel

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

- a) Unless otherwise agreed to in writing by the parties, the arbitration panel shall consist of three members: the employer's delegate, the exclusive representative's delegate and the neutral chairman.
- b) Selection of the neutral chairman shall proceed as follows:
 - 1) Within seven days of receipt of a timely filed Demand of Compulsory Interest Arbitration, the Board shall send the parties a list of seven interest arbitrators selected from the Illinois Public Employees Mediation/Arbitration Roster, unless the parties have notified the Board of an agreement to use an alternative source of interest arbitrators. The parties may agree to use an alternate source of interest arbitrators at any time prior to appointment of an arbitrator by the Board.
 - 2) The parties may select an individual on the list provided by the Board or any other individual mutually agreed upon by the parties. Within seven days following the receipt of the list, the parties shall notify the Board of the person they have selected. Unless the parties agree on an alternate selection procedure, they shall alternatively strike one name from the list provided by the Board until only one name remains. A coin toss shall determine which party shall strike the first name. (Section 14(c) of the Act.)
 - 3) If the parties fail to notify the Board of their selection for neutral chairman, the Board shall appoint, at random, a neutral chairman from the Illinois Public Employees Mediation/Arbitration Roster. (Section 14(c) of the Act.)
 - 4) If the neutral chairman is unable or unwilling to commence the hearing within 15 days following his appointment or within such additional time period to which the parties may agree pursuant to Section 1230.90(a) of this Part, or if the neutral chairman is otherwise unable or unwilling to serve, the parties shall notify the Board within five days. The Board shall provide the parties with a second list of seven interest arbitrators from the Illinois Public Employees Mediation/Arbitration Roster. Within seven days after the Board provides the list, the parties shall select an individual from the list or any other individual to serve as neutral chairman. If the parties fail to notify the Board of their selection, the Board shall appoint a neutral chairman. Except in exceptional circumstances, the Board shall not supply the parties with more than two lists of interest arbitrators.
 - c) Within 10 days following the filing of the demand for compulsory interest arbitration, each party shall notify the Board of the name, address and telephone number of its delegate to the interest arbitration panel. Delegates who are public officers or public employees shall continue on the payroll of the public employer during the arbitration proceeding without loss of pay.
 - d) Upon receipt of the names of the delegates and upon selection of a neutral chairman, the Board shall notify the neutral chairman in

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

writing of the Chairman's his appointment. The date of receipt of such notice shall be the date of the neutral chairman's appointment.

(Source: Amended at 17 Ill. Reg. 15599, effective September 13, 1993)

Section 1230.90 Conduct of the Interest Arbitration Hearing

- a) The neutral chairman of the arbitration panel shall provide the parties with reasonable notice of a hearing to commence within 15 days following the Chairman's his appointment. The parties may agree in writing to extend the time for commencement of the hearing for a period of time not to exceed 90 days. The hearing shall conclude within 30 days following its commencement, unless the parties agree to extend this period.
- b) The arbitration panel shall be responsible for choosing the location of the hearing and securing the premises. The Board hereby deems it appropriate for hearings to take place at the location selected by the panel. Requests to use the hearing rooms at the Board's offices must be made to the Board at least 10 days in advance, and will only be granted if space is available.
- c) The neutral chairman shall preside over the hearing and shall take testimony. (Section 14(d) of the Act). The neutral chairman shall control the hearing to ensure that it is concluded expeditiously within 30 days after its commencement or within such longer period to which the parties may agree.
- d) The neutral chairman shall have the authority to issue subpoenas in accordance with this Section. Subpoenas shall be secured by the neutral chairman from the Board's office. If any person refuses to obey a subpoena, or refuses to be sworn or to testify, or if any witness, party or representative is guilty of contempt while in attendance at the hearing, (Section 14(e) of the Act) the neutral chairman may advise the Board's General Counsel. The General Counsel shall request the assistance of the Attorney General to invoke the aid of the circuit court within the jurisdiction in which the hearing is being held. (Section 14(e) of the Act).
- e) The arbitration proceeding shall be informal. Technical rules of evidence shall not apply and the competence of evidence shall not thereby be deemed impaired. (Section 14(d) of the Act).
- f) The arbitration panel may administer oaths, require the attendance of witnesses and the production of books, papers, contracts, agreements, and documents as may be deemed by it to be material to a just determination of the issues in dispute. (Section 14(e) of the Act) (Ill. Rev. Stat. 1989 1991, ch. 48, par. 1614(e)) [5 ILCS 315/14(e)].
- g) The hearing proceedings shall be transcribed. The arbitration panel shall arrange for the recording and transcription of the proceedings. The costs of recording and transcribing the hearing shall be shared equally by the parties. Any party that desires a copy of the

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

- transcript shall be responsible for the cost of its copy.
- h) The neutral chairman, if he is of the opinion that it would be useful or beneficial to do so, may remand the dispute to the parties for further collective bargaining for a period not to exceed two weeks. (Section 14(f) of the Act). The chairman shall notify the Board in writing of any such remand. If the dispute is remanded to the parties, the running of the time period for conclusion of the hearing shall be stayed.
- i) Majority actions and rulings shall constitute the actions and rulings of the arbitration panel. (Section 14(d) of the Act).
- j) Arbitration proceedings shall not be interrupted or terminated by reason of any unfair labor practice charges involving either party. (Section 14(d) of the Act).
- k) Whenever one party has objected in good faith to the presence of an issue before the arbitration panel on the ground that the issue does not involve a subject over which the parties are required to bargain, the arbitration panel's award shall not consider that issue. However, except as provided in subsections (l) and (m) of this part, the arbitration panel may consider and render an award on any issue that has been declared by the Board, or by the General Counsel pursuant to 80 Ill. Adm. Code 1200.140(b), to be a subject over which the parties are required to bargain.
- l) In arbitration proceedings involving peace officers, the arbitration panel shall not consider or render an award on residency requirements, the total number of employees employed by the department, mutual aid and assistance agreements to other units of government, and the criteria by which force, including deadly force, can be used. The panel shall consider the type of equipment, other than uniforms, issued or used, or manning levels only if it finds that the issue involves a serious risk to the safety of a peace officer beyond that which is inherent in the normal performance of police duties. (Section 14(i) of the Act).
- m) In arbitration proceedings involving firefighters or paramedics employed by fire departments or fire protection districts, the arbitration panel shall not consider or render an award on residency requirements, the total number of employees employed by the department, mutual aid and assistance agreements to other units of government, and the criteria by which force, including deadly force, can be used. The panel shall consider the type of equipment, other than uniforms, issued or used, only if it finds that the issue involves a serious risk to the safety of a fire fighter beyond that which is inherent in the normal performance of the fire fighter duties. (Section 14(i) of the Act). These limitations shall not apply to any provision of a firefighter collective bargaining agreement in effect and applicable as of January 1, 1986.
- n) If issues of peace officer manning, or peace officer, firefighter or paramedic equipment are raised, unless otherwise agreed to by the parties, the panel shall receive evidence concerning the existence of

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

- a serious safety risk beyond that which is inherent in the normal performance of the employee's duties and evidence concerning the merits of the issue in the same proceeding.
- o) The arbitration panel shall:
- 1) determine which issues are in dispute and which of those issues are economic issues and serve a copy of that determination on the parties; and
 - 2) require the parties to submit their final offers of settlement on each economic issue in dispute;
 - 3) The panel need not determine whether, with regard to protective service employees, equipment or manning issues involve serious safety risks beyond that which is inherent in the normal performance of the employees' duties at this stage of the proceeding.
 - 4) The panel may allow the parties reasonable additional time, as determined by the number and the complexity of the issues, for presenting written or oral arguments in support of their positions. The hearing shall be considered concluded when final offers are submitted or when written or oral arguments are presented, whichever is later.
- p) The neutral chairman's fee, and costs of recording and transcribing the hearing, the rent, if any for the hearing room, and all other costs of the proceeding, except for supplemental proceedings necessitated by an employer's rejection of an arbitration award, shall be shared equally by the parties.

(Source: Amended at 17 Ill. Reg. 15599, effective September 13, 1993)

Section 1230.150 Mediation

- a) Requests for mediation shall be on Board form 038. Joint requests for mediation may be made by telephone, provided that a written request follows immediately.
- b) Requests for mediation in negotiations for either successor or initial contracts may be made at any time after the parties have commenced negotiations.
- c) Requests for mediation shall generally be made jointly. Unilateral requests for mediation may be made only after the party requesting mediation has asked the other party to join in the request and the other party has refused. Unilateral requests for mediation shall be accompanied by a written statement setting forth the circumstances of the other party's refusal to join in the request. Upon receipt of a unilateral request for mediation, the Board shall investigate the request. If the Board's investigation discloses that the request was properly filed under this part, that bargaining has not resulted in an agreement, and that mediation would assist the parties, the Board shall grant the request. Unilateral requests filed by the exclusive

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

representative in conformance with this Section shall satisfy the precondition for a lawful strike set forth in Section 17(a)(4) of the Act.

- d) Whenever the Board grants a request for mediation it shall provide the parties with a panel of at least three mediators listed on the Public Employees Mediation/Arbitration Roster. The parties shall have seven days from receipt of the list to choose one of the persons on the panel or any other person they choose to serve as mediator. If at the end of this seven-day period the parties have not notified the Board of their selection, the Board shall appoint a mediator.
- e) Mediation shall be conducted as follows:

- 1) *The function of the mediator shall be to communicate with the employer and the exclusive representative or their representatives and to endeavor to bring about an amicable and voluntary settlement. (Section 12(a) of the Act).*
- 2) The mediator may hold joint and separate conferences with the parties. The conferences shall be private unless the parties otherwise agree.
- 3) Information disclosed by a party to a mediator in the performance of mediation functions shall not be disclosed voluntarily or by compulsion. All files, records, reports, documents, or other papers prepared by a mediator shall be considered confidential. The mediator shall not produce any confidential records of, or testify in regard to, any mediation previously conducted by him, on behalf of any party to any case pending in any type of proceeding.
- 4) The mediator shall keep the Board apprised of the status of the negotiations.

- f) Compensation of the mediator shall be paid equally by the parties, however, if either party requests the use of mediation services from the federal mediation and conciliation service, the other party shall either join in such request or bear the additional cost of mediation services from another source. (Ill. Rev. Stat. 1989 1991, ch. 48, par. 1617(a)(5)) [5 ILCS 315/17(a)(5)].

(Source: Amended at 17 Ill. Reg. 15599, effective September 13, 1993)

Section 1230.160 Fact-finding

- a) The parties may agree in writing to the use of fact-finding in resolving their disputes.
- b) Requests for fact-finding shall be filed on Board form 038 and shall be accompanied by a copy of the parties' agreement to use fact-finding.
- c) Upon receipt of the request for fact-finding, the Board shall supply the parties with a list of seven fact-finders listed on the Public Employees Mediation/Arbitration Roster. The parties shall select one

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

individual from the list to serve as fact-finder within 10 days of service of the list. If the parties advise the Board that they are unable to select one of the seven individuals on the list, the Board shall provide a second list. Except in extraordinary circumstances, the Board shall not provide more than two lists. The parties shall notify the Board of the name of the individual they select to serve as fact-finder. Upon being so notified, the Board shall appoint the fact-finder.

- d) If fact-finding follows mediation, the parties may agree to use the mediator as fact-finder, provided that the mediator is not a Board employee.
- e) The fact-finding hearing shall be conducted as follows:

- 1) The person appointed as fact-finder shall immediately establish the dates and place of hearing.
- 2) Upon request to the Board, the Board shall issue subpoenas for hearings conducted by the fact-finder.
- 3) The fact-finder may administer oaths. (Ill. Rev. Stat. 1985 1991, ch. 48, par. 1613(b)) [5 ILCS 315/13(b)].

- f) The fact-finder shall issue a his report and findings as follows:
- 1) The fact-finder shall serve these his findings and report on the parties and the Board within 45 days after the fact-finder's his appointment, unless the parties mutually agree to extend the time period.
 - 2) Within five days after service of the findings and report, the fact-finder shall mail the his findings and report to all newspapers of general circulation in the community as mutually designated by the parties, unless the parties mutually request otherwise.

- g) The costs of the fact-finding proceeding shall be shared equally by the parties.

(Source: Amended at 17 Ill. Reg. 15599, effective September 13, 1993)

Section 1230.180 Strikes

Employees in general public employee units have the right to strike, provided that the following conditions have been met:

- a) The employees are represented by an exclusive bargaining representative (Ill. Rev. Stat. 1989 1991, ch. 48, par. 1617(a)(1)) [5 ILCS 315/17(a)(1)] that has been certified by the Board or that has a valid claim to status as an historical bargaining representative pursuant to Section 3(f) of the Act;
- b) The collective bargaining agreement between the public employer and the public employees, if any, has expired, or such agreement does not prohibit the strike. (Ill. Rev. Stat. 1989 1991, ch. 48, par. 1617(a)(2)) [5 ILCS 315/17(a)(2)]. Pursuant to Section 8 of the Act, a collective bargaining agreement must contain provisions prohibiting

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

strikes for the agreement's duration and providing for a grievance procedure culminating in final and binding arbitration of disputes over the interpretation of the agreement unless the parties agree to forgo these provisions.

c) *The public employer and the labor organization have not mutually agreed to submit the disputed issues to final and binding arbitration.* (Ill. Rev. Stat. 1989 1991, ch. 48, par. 1617(a)(3)) [5 ILCS 315/17(a)(3)].

d) *The exclusive representative has requested a mediator pursuant to Section 12 of the Act and Section 1230.150 of this Part and mediation has been used* (Ill. Rev. Stat. 1989 1991, ch. 48, par. 1617(a)(4)) [5 ILCS 315/17(a)(4)].

e) *At least five days have elapsed after a notice of intent to strike has been given by the exclusive representative to the public employer.* (Ill. Rev. Stat. 1989 1991, ch. 48, par. 1617(a)(5)) [5 ILCS 315/17(a)(5)]. A copy of the notice shall be filed with the Board and shall reference the contract number in cases of negotiations for successor contracts or the certification case number in cases of negotiations for initial contracts. The five day time period shall be calculated in accordance with 80 Ill. Adm. Code 1200.30(a) and (b).

(Source: Amended at 17 Ill. Reg. 15599, effective September 13, 1993.)

Section 1230.190 Petitions for Strike Investigations

a) *If a strike, which may constitute a clear and present danger to the health and safety of the public is about to occur or is in progress, the public employer concerned may* (Ill. Rev. Stat. 1989 1991, ch. 48, par. 1618(a)) [5 ILCS 315/18(a)] file with the Board a petition for a strike investigation.

b) A petition for a strike investigation shall be on form 039 by the Board and shall contain:

- 1) the name, address and telephone number of the petitioner;
- 2) the name, address, telephone number and affiliation, if any, of the labor organization that is threatening or conducting the strike;
- 3) the name, address and telephone number of the parties' representatives;
- 4) the date that the strike began or is threatened to begin;
- 5) a detailed description of the danger posed by the strike to the public health and safety.

c) Petitioner shall attach to its petition copies of all relevant evidence, including affidavits, of the existence of a strike or the threat of a strike, and of the existence of a *clear and present danger to the health and safety of the public.* (Section 18 of the Act).

d) The employer shall serve a copy of the petition on the labor organization prior to or simultaneously with its filing with the

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

Board. Service shall be in person or by overnight delivery. The Board shall investigate the petition. If there are disputed issues of material fact, the Board shall hold an expedited hearing. The Board shall issue its findings within 72 hours following the filing of the petition.

f) If the Board finds that there is no strike or threat of a strike, or that there is no *clear and present danger to the health and safety of the public,* (Section 18 of the Act) or that the employer is otherwise not entitled to relief pursuant to Section 18 of the Act, the Board shall serve its findings on the parties. The employer may file its petition for a strike investigation only if it alleges that circumstances have changed since the filing of the Board's findings.

g) If the Board finds that there is a strike or a threat of a strike that poses a *clear and present danger to the health and safety of the public,* (Section 18 of the Act) and the Board finds that the employer is otherwise entitled to relief pursuant to Section 18 of the Act, the Board shall serve its findings on the parties.

h) Whenever a court enjoins a strike and orders interest arbitration in accordance with Section 14 of the Act, Section 1230.80 through 1230.110 of this Part shall govern the arbitration.

(Source: Amended at 17 Ill. Reg. 15599, effective September 13, 1993.)

SUBPART E: ILLINOIS PUBLIC EMPLOYEES MEDIATION/ARBITRATION ROSTER

Section 1230.220 Mediation/Arbitration Roster

a) The Boards shall establish an Illinois Public Employees Mediation/Arbitration Roster and shall make its services available for mediation, fact-finding, interest arbitration, grievance arbitration, and grievance mediation. The Roster shall list qualified mediators, fact-finders, interest arbitrators, and grievance arbitrators. A person may be qualified in more than one category.

b) Appointment to the Roster shall be based upon a majority vote of the members of both Boards, after application by the individual. The application shall be on a form developed by the Boards.

c) In making appointments to the Roster, the Boards shall consider such factors as experience and training, membership on other recognized mediation or arbitration panels, education, prior published awards, current advocacy in employment relations matters, letters of recommendation supporting the application, and any other relevant material supplied by the applicant or requested by the Boards. Individuals appointed to the Roster shall be residents of the State of Illinois. The members of the Public Employees Mediation/Arbitration Roster are persons who are on the labor arbitration panels of either the American Arbitration Association or the Federal Mediation and Conciliation Service or who are members of the National Academy of

ILLINOIS REGISTER

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

- Arbitrators.
- d) Individuals appointed to the Roster shall file with the Boards a brief biographical sketch, a concise resume of their experience relevant to the position for which they are listed and a fee schedule. Whenever an individual is selected to serve in a case, that individual shall not charge a fee greater than that listed in the fee schedule and individual he has filed with the Boards. A minimum of 30 days notice shall be given to the Board for changes in fee schedules.
- e) Requests for panels from the Roster shall be submitted on a form developed by the Boards and shall include:
- 1) The name, address, telephone number and affiliation, if any, of the parties submitting the request;
 - 2) The name, address and telephone number of the parties' representatives;
 - 3) The type of service requested; and
 - 4) A brief description of the nature of the dispute, including unresolved issues, to the extent known.
- f) Whenever the Board provides the parties with a panel selected from the Roster, the Board shall provide copies of the biographical sketches and fee schedules of the panelists.
- g) The parties may jointly request that panels submitted to them contain or omit specific individuals. No party may unilaterally make such a request.
- h) Individuals listed on the Roster shall abide by the Code of Professional Responsibility for Arbitrators of Labor-Management Disputes, as amended, effective May 29, 1985, and adopted by the National Academy of Arbitrators and the American Arbitration Association, and shall take the constitutional affirmation of office. This incorporation by reference does not contain any further amendments.

(Source: Amended at 17 Ill. Reg. 15599, effective September 13, 1993)

ILLINOIS REGISTER

STATE OF ILLINOIS
ILLINOIS STATE LABOR RELATIONS BOARD
NOTICE OF ADOPTED AMENDMENTS

- 1) HEADING OF THE PART: Representation Proceedings
- 2) CODE CITATION: 80 Ill. Adm. Code 1210
- 3) SECTION NUMBERS:

1210.10	Amendment
1210.100	Amendment
1210.140	Amendment
1210.160	Amendment
1210.170	Amendment
1210.180	Amendment
- ADOPTED ACTION:
- 4) STATUTORY AUTHORITY:

Illinois Public Labor Relations Act (Ill. Rev. Stat. 1991, ch. 48, pars. 1609, 1605(i) and (j).) [5 ILCS 315/9, 5(i) and (i) (1992)].
- 5) EFFECTIVE DATE OF AMENDMENTS: September 13, 1993
- 6) DOES THIS RULEMAKING CONTAIN AN AUTOMATIC REPEAL DATE? No
- 7) DO THESE AMENDMENTS CONTAIN INCORPORATIONS BY REFERENCE? No
- 8) DATE FILED IN AGENCY'S PRINCIPAL OFFICE: August 26, 1993
- 9) NOTICE OF PROPOSAL PUBLISHED IN ILLINOIS REGISTER:

March 26, 1993, 17 Ill. Reg. 3734
- 10) HAS JCAR ISSUED A STATEMENT OF OBJECTIONS TO THESE RULES? No
- 11) DIFFERENCES BETWEEN PROPOSAL AND FINAL VERSION: None
- 12) HAVE ALL THE CHANGES AGREED UPON BY THE AGENCY AND JCAR BEEN MADE AS INDICATED IN THE AGREEMENT LETTER ISSUED BY JCAR? Yes

STATE OF ILLINOIS
ILLINOIS STATE LABOR RELATIONS BOARD
NOTICE OF ADOPTED AMENDMENTS

13) WILL THESE AMENDMENTS REPLACE AN EMERGENCY RULE (AMENDMENT, REPEALER) CURRENTLY IN EFFECT? No

14) ARE THERE ANY AMENDMENTS PENDING ON THIS PART? No

15) SUMMARY AND PURPOSE OF AMENDMENTS:

The amendments to this Part were made to specify the procedure to be used if an administrative law judge becomes unavailable and to provide a procedure for changing the name of an employing entity. The rest of the amendments make technical corrections.

16) INFORMATION AND QUESTIONS REGARDING THESE ADOPTED AMENDMENTS SHALL BE DIRECTED TO:

Lydia Mills Wendt
Deputy General Counsel
Illinois State Labor Relations Board
320 West Washington Street, Suite 500
Springfield, IL 62701

THE FULL TEXT OF THE ADOPTED AMENDMENTS BEGINS ON THE NEXT PAGE:

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

TITLE 80: PUBLIC OFFICIALS AND EMPLOYEES

SUBTITLE C: LABOR RELATIONS

CHAPTER IV: ILLINOIS STATE LABOR RELATIONS BOARD/

ILLINOIS LOCAL LABOR RELATIONS BOARD

PART 1210

REPRESENTATION PROCEEDINGS

Section

1210.10	General Statement of Purpose
1210.20	Labor Organization Options in Seeking Recognition
1210.30	Employer Options in Responding to Recognition Requests
1210.40	Representation Petitions
1210.50	Intervention Petitions
1210.60	Decertification Petitions
1210.70	Timeliness of Petitions
1210.80	Showing of Interest
1210.90	Posting of Notice
1210.100	Processing of Petitions
1210.110	Consent Elections
1210.120	Bargaining Unit Determinations
1210.130	Eligibility of Voters
1210.140	Conduct of the Election
1210.150	Objections to the Election
1210.160	Voluntary Recognition Procedures
1210.170	Petitions for Amendment or Clarification of the Bargaining Unit
1210.180	Petitions to Amend Certification
1210.190	Expedited Elections Pursuant to Section 10(b)(7)(C) of the Act

AUTHORITY: Implementing Section 9 and authorized by Section 5(i) and (j) of the Illinois Public Labor Relations Act (Ill. Rev. Stat. 1991, ch. 48, pars. 1609, 1605(i) and (j)) [5 ILCS 315/9, 5(i) and (j)].

SOURCE: Emergency rule adopted at 8 Ill. Reg. 16014, effective August 22, 1984, for a maximum of 150 days; adopted at 9 Ill. Reg. 1870, effective January 25, 1985; amended at 11 Ill. Reg. 6461, effective March 27, 1987; amended at 12 Ill. Reg. 20110, effective November 18, 1988; amended at 14 Ill. Reg. 19930, effective November 30, 1990; amended at 17 Ill. Reg. 15612, effective September 13, 1993.

Section 1210.10 General Statement of Purpose

The regulations contained in this Part detail the procedures that employers, employees and labor organizations should use for employer voluntary recognition of a labor organization and for instituting representation and related proceedings. These procedures are the exclusive means by which a public employer may recognize a labor organization after the effective date of these rules. Any other purported recognition effected after the effective date of

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

these rules shall not bar representation petitions, nor shall any collective bargaining agreement negotiated by the parties pursuant to the purported recognition bar representation petitions pursuant to the "Illinois Public Labor Relations Act" ("Act") (Ill. Rev. Stat. §999 1991, ch. 48, pars. 1601 et seq.) [5 ILCS 315].

(Source: Amended at 17 Ill. Reg. 15612, effective September 13, 1993)

Section 1210.100 Processing of Petitions

- a) Within seven days after service of a petition, an employer shall file a list containing the full names of the employees in the proposed bargaining unit. In the event the employer does not supply the list within seven days, the Board shall administratively determine the adequacy of the showing of interest, based on the information provided by the union.
- b) All parties served with a representation or decertification petition shall may file a response to the petition. Any response filed shall set forth the positions of the parties with respect to the matters asserted in the petition, including, but not limited to, the appropriateness of the bargaining unit and, to the extent known, whether any employees sought by petitioner to be included in the unit are supervisory, managerial or confidential. If a party agrees to the appropriateness of the unit proposed in the petition, it shall so indicate. If a party disagrees with the unit proposed in the petition, it shall describe with particularity what it considers to be an appropriate unit, and shall include a description of the job titles and classifications of the employees to be included and of those to be excluded.
- c) The setting forth of a party's position with respect to the appropriate unit shall not be deemed to waive or otherwise preclude the right of that party to subsequently assert a different position with respect to what unit it considers to be appropriate.
- d) Petitions to intervene in the election may be filed with the Board no later than 15 days prior to the date of the election. However, any intervenor who files after the date set for hearing or, if no hearing is held, after the approval of a consent election agreement or the direction of an election, shall have waived objections to the bargaining unit.
- e) Upon receipt of the petition, the Board or its agent shall investigate the petition. The Executive Director shall dismiss a petition when a petition has been filed untimely; when the bargaining unit is clearly inappropriate; when the showing of interest is not adequate; when the employer is not covered by the Act; when the employees are not covered by the Act; and when for any other reason there is no reasonable cause to believe that a question of representation exists. The parties shall be given 10 days after service of the Dismissal to appeal the

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

Dismissal to the Board. If the investigation discloses that there is reasonable cause to believe that a question concerning representation exists the Board shall set the matter for hearing before an administrative law judge hearing-officer. All parties shall be given a minimum of 14 days notice of the hearing. If the only issues remaining between the parties after the investigation are logistical, e.g. the date of the election, the Executive Director may issue an Order Directing Election. The parties shall be given 10 days after service of the Executive Director's Order Directing Election to appeal the Order to the Board.

- f) Interested persons, other than labor organizations, who may be necessary to the proceedings, who wish to intervene in the hearing shall direct such requests to the administrative law judge hearing-officer. The request shall be in writing and shall state the grounds for intervention. The administrative law judge hearing-officer shall have discretion to grant or deny the request for intervention. The decision shall be based upon the interests of the intervenor, whether those interests will be adequately protected by existing parties, and the timeliness of the intervenor's request.
- g) The administrative law judge hearing-officer may schedule a prehearing conference or request statements of position when it appears to the administrative law judge hearing-officer that such would expedite the procedure.
- h) The hearing shall be non-adversarial in nature. All parties may present evidence and make arguments, subject to the control of the administrative law judge hearing-officer.
- i) The administrative law judge hearing-officer shall inquire fully into all matters in dispute, and shall obtain a full and complete record. The administrative law judge hearing-officer shall file and serve on the parties a recommended disposition of the case as expeditiously as possible.
- j) In the event the administrative law judge becomes unavailable to the Board during the proceeding, for reasons including but not limited to death or resignation, the general counsel or the general counsel's agent may designate another administrative law judge.
- jj) Exceptions
 - 1) Parties may file exceptions to the administrative law judge's hearing-officer's recommendation and briefs in support of those exceptions no later than 14 days after service of the recommendation. Parties may file responses to exceptions and briefs in support of the responses no later than 10 days after service of the exceptions. Each party shall serve its exceptions, responses, and briefs on the other parties. Parties desiring oral argument before the Board shall request oral argument and provide the reasons for the requests in their exceptions or responses. The Board will grant or deny requests for oral argument depending upon the significance, complexity and novelty of the issues. If no exceptions have been filed within

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

the 14-day period, the parties will be deemed to have waived their exceptions.

2) Requirements

- A) Each exception
- i) shall set forth specifically the questions of procedure, fact, law, or policy to which exceptions are taken;
 - ii) shall identify that part of the administrative law judge's ~~hearing--officer's~~ recommended ~~opinion--or~~ decision and order to which objection is made; and
 - iii) shall state the grounds for the exceptions and shall include the citation of authorities unless set forth in a supporting brief.
- B) Any exception to a ruling, finding, conclusion, or recommendation which is not specifically urged shall be deemed to have been waived. Any exception which fails to comply with the foregoing requirements may be disregarded.
- 3) Any brief in support of exceptions shall be confined to the subjects raised in the exceptions and shall contain, in the order indicated, the following:
- A) A clear and concise statement of the case containing all that is material to the consideration of the questions presented.
 - B) A specification of the questions involved and to be argued.
 - C) The argument, presenting clearly the points of fact and law relied upon in support of the position taken on each question.

4) Briefs in support of responses to exceptions shall be limited to the questions raised in the exceptions and in the brief in support thereof. It shall present clearly the points of fact and law relied upon in support of the positions taken on each question.

*7) The Board will review the administrative law judge's ~~hearing officer's~~ recommendation upon request by a party or on its own motion. The Board may adopt all, part, or none of the recommendation depending on the extent to which it is consistent with the record and the applicable law. If the Board determines that a question concerning representation exists, the Board shall direct the holding of an election on a date and at a time and place set by the Board. The Board shall direct the posting of a notice of election.

*8) Within seven days following the Board's direction of an election, the employer shall furnish the Board and the labor organizations with a list of the full names, alphabetized by last name, and addresses of the employees eligible to vote in the election. The lists shall be provided by personal delivery or certified mail. The employer shall obtain receipts verifying delivery.

*9) Where the Board orders an election in a unit different from the one petitioned for, the petitioner and intervenors, if any, shall have

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

five days to submit a showing of interest in the new unit.

(Source: Amended at 17 Ill. Reg. 15612, effective September 13, 1993)

Section 1210.140 Conduct of the Election

- a) The election shall be conducted under the supervision of the Board. Voting shall be by secret ballot. Whenever the Board determines that a mail ballot will better effectuate the purposes of the Act, it shall conduct the election by mail ballot. In all other cases, it shall conduct the election on site.
- b) Ballots shall list all labor organizations that properly petitioned or intervened in the election, the incumbent exclusive representative, and the choice of "No Representation".
- c) Where an election involves a bargaining unit that includes craft employees, and there has been a proper petition for a separate craft unit, craft employees shall be given two ballots: one to vote for or against craft severance and a second to vote on choice of representative, if any. Noncraft employees shall only be given ballots for voting on choice of representative.
- d) Where an election involves a bargaining unit containing professional and nonprofessional employees, all employees shall be given two ballots: one for indicating whether they desire a combined professional nonprofessional unit and a second for indicating choice of representative, if any.
- e) When the election is conducted on site, the following procedures shall apply:
 - 1) Each party shall be entitled to an equal number of observers as determined by the Board or its agent or as provided for in a Board-approved stipulation. Observers for the employer may not be individuals who supervise any of the employees in the bargaining unit. The conduct of observers is subject to such reasonable limitations as the Board or its agent may prescribe.
 - 2) The Board's agent shall prescribe the area in proximity to the polling place in which electioneering shall be prohibited. Cameras, video equipment, and similar equipment shall be prohibited within the actual polling area while employees are voting.
 - 3) Ballot boxes shall be examined in the presence of the observers immediately prior to the opening of the polls and shall be sealed at the opening of the polls. The seal shall allow for one opening on the top of the ballot box for voters to insert their ballots.
 - 4) The Board's agent or any authorized observer may challenge the eligibility of any voter. The observer must state the reason for the challenge. A voter whose identity has been challenged may establish his identity by showing a driver's license or any other

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

piece of identification acceptable to the Board's agent. A challenged voter shall be permitted to vote in secret. The challenged voter's ~~His~~ ballot shall be placed in a "challenged ballot" envelope. The envelope shall be sealed by the Board's agent and initialed by the observers. The reason for the challenge and the voter's name shall be marked on the envelope and the envelope shall be placed in the ballot box.

- 5) A voter shall mark a cross (X) or check ~~(--)~~ mark in the circle or block designating the voter's ~~his~~ choice in the election. The intent of the voter shall be followed in the marking of the ballot. If the ballot is defaced, torn, marked in such a manner that it is not understandable, or identifies the voter, the ballot shall be declared void. If the voter inadvertently spoils a ballot, it may be returned ~~he may return it~~ to the Board's agent who shall give the voter another ballot. The spoiled ballot shall be placed in a "spoiled ballot" envelope. The envelope shall be sealed by the Board's agent and initialed by the observers, and the Board's agent shall place the envelope in the ballot box.

- 6) A voter shall fold the ~~his~~ ballot so that no part of its face is exposed and, on leaving the voting booth, shall deposit the ballot in the ballot box. If the election is continued for more than one period, the ballot box shall be sealed by the Board's agent and initialed by the observers until the subsequent opening of the polls and shall remain in the custody of the Board's agent until the counting of the ballots.

- 7) The Board's agent may privately assist any voter who, due to physical or other disability, is unable to mark ~~his~~ the ballot.

- 8) Each party shall designate a representative to observe the tallying of the ballots.

- 9) Upon conclusion of the polling, ballots shall be tallied in accordance with subsection (h). If there was only one polling location, ballots shall be tallied at the polling site. If there was more than one polling location, the Board's agent shall seal the ballot boxes, which shall be initialed by the observers, and bring them to a predetermined central location. When all of the ballot boxes have arrived, they shall be opened by the Board's agent and the ballots shall be commingled for tallying.

- f) When the election is to be conducted by mail ballot, the following procedures shall apply:

- 1) Each eligible voter shall be mailed a packet containing a ballot, ballot envelope, a pre-addressed stamped return envelope, and instructions.

- 2) The instructions shall advise the voter to mark the ~~his~~ ballot without using a self-identifying mark ~~identifying himself~~, place the ballot in the ballot envelope, seal the ballot envelope and place it in the return envelope, seal the return envelope, both print and sign the return envelope across the seal, and mail it

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

to the Board. The instructions will also advise the voter of the date, set by the Board, by which return envelopes must be postmarked.

- 3) When the election includes a vote on a combined professional nonprofessional unit, or a vote on craft severance, the appropriate voters shall be mailed separate ballots and ballot envelopes for unit preference or craft severance, and for choice of representative. These voters shall be instructed to mark the ballots separately, place them in their respective ballot envelopes, and return both ballot envelopes in the return envelope.

- 4) The parties may designate an equal number of representatives, as set by the Board, to observe the tallying of the ballots. Ballots shall be tallied on a date set by the Board.

- 5) Ballots shall remain unopened in their return envelopes until the date set for tallying. On the date set for tallying, the representatives and the Board's agent shall have an opportunity to challenge any ballots prior to the opening of the return envelopes. Challenged ballots shall be handled in accordance with subsection (e)(4) of this Part. All ballots that have not been challenged shall be separated from their return envelopes and commingled prior to tallying.

- 6) The ballots shall be tallied in accordance with Section 1210.140(h) of this Part.

- g) The Board's agent shall attempt to resolve ballot challenges before the ballots are counted.

- h) In mail and on site elections, ballots will be tallied in the presence of the parties' representatives attending the count as follows:

- 1) The Board's agent shall segregate the challenged ballots. The challenged ballots shall only be opened and counted if they could be determinative of the outcome of the election.

- 2) If challenges to ballots have not been resolved, and if the challenges could affect the outcome of the election, the Board will treat the challenges in the same manner as objections to the election.

- 3) When the election includes a vote on craft severance, the craft employee ballots on craft severance shall be tallied first. If a majority of the craft employees casting valid craft severance ballots choose craft severance, the craft and noncraft ballots on choice of representative, if any, shall be tallied separately. If a majority of the craft employees casting valid ballots do not choose craft severance, the ballots on choice of representative, if any, shall be tallied together.

- 4) When the election includes a vote on a combined professional nonprofessional unit, the ballots on unit preference shall be tallied first. Separate tallies shall be made for professional and nonprofessional employees. If a majority of the employees casting valid ballots in each group vote for a combined unit, the

NOTICE OF ADOPTED AMENDMENT(S)

ballots on choice of representative, if any, shall be tallied together. If a combined unit fails to receive a majority vote in either or both groups, the ballots on choice of representative, if any, shall be tallied separately.

- i) When there are only two choices on the ballot and each receives 50 percent of the vote, the following shall apply:

1) In representation elections, absent valid objections or challenges, the Board shall certify that a majority of the employees have not voted to select the labor organization as their exclusive representative.

2) In decertification elections, absent valid objections or challenges, the Board shall certify that a majority of the employees have not maintained their desire to be represented by the labor organization.

- j) Where there are three or more choices on the ballot (two or more labor organizations and "No Representation") and no choice receives a majority of the valid ballots cast, the Board shall conduct a runoff election between the two choices that received the most votes. When there is a tie for first place among more than two choices, the runoff shall be among those choices involved in the tie. When there is a tie for second place, the runoff shall be among the first place choice and those tying for second place. The results of votes taken during the first election on craft severances and/or combined professional nonprofessional units, if applicable, shall be binding on the runoff election.

- k) The Board shall preserve all ballots until such time as any objections to the election have been resolved and the results have been certified.

(Source: Amended at 17 Ill. Reg. 15612, effective September 13, 1993)

Section 1210.160 Voluntary Recognition Procedures

- a) These voluntary recognition procedures may not be used under the following circumstances:

- 1) whenever a labor organization is recognized in accordance with the Act as the exclusive representative of all or some of the employees in the bargaining unit;
- 2) whenever there has been a valid representation or decertification election in a bargaining unit containing all or some of the employees within the preceding 12 months;
- 3) whenever the proposed bargaining unit would include both professional and nonprofessional employees;
- 4) whenever the employer does not believe that the proposed bargaining unit is appropriate; and
- 5) whenever the employer does not believe that the labor organization requesting voluntary recognition represents a

NOTICE OF ADOPTED AMENDMENT(S)

- b) When majority of the employees in the proposed bargaining unit. recognition procedures, the employer and labor organization must file a request for voluntary recognition with the Board. The request shall be on a form developed by the Board. The request shall be signed by both parties and shall contain the following:

- 1) the name, address and telephone number of the employer;
- 2) the name, address, telephone number and affiliation, if any, of the labor organization;
- 3) the name, addresses and telephone numbers of the parties' representatives;
- 4) a specific and detailed description of the proposed bargaining unit, including job titles and classifications;
- 5) the number of employees in the proposed bargaining unit and whether the proposed bargaining unit includes professional employees; and
- 6) a statement describing why the employer and the labor organization are satisfied that the labor organization represents the majority of the employees in the proposed an-appropriate bargaining unit; and-

7) a statement describing why the employer and the labor organization are satisfied that the proposed unit is an appropriate bargaining unit within the meaning of Section 9 of the Act.

- c) The request must be supported by objective evidence of the majority status of the labor organization. (See Section 1210.80 of this Part.)

1) If authorization cards are offered as evidence, they may be jointly submitted to the Board or may be submitted by the labor organization confidentially to the Board.

2) If authorization cards are offered as evidence, those cards that would not qualify as evidence in support of a representation petition will not be considered sufficient evidence of majority status.

3) If employees signing such authorization cards have also signed cards authorizing other labor organizations to represent them, those cards will not be considered sufficient evidence of majority status.

- d) Following the filing of a request for voluntary recognition, the Board shall provide the employer with a Notice of Voluntary Recognition which shall be posted on bulletin boards and other places where notices for employees in the bargaining unit are customarily posted. The Board's Notice shall have the following information:

- 1) statement that, subject to Board certification, the employer intends to recognize the employee organization if no competing claims of representation are filed with the Board;
- 2) the name and address of the employer;
- 3) the name and address and affiliation, if any, of the labor organization;

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

- 4) a specific and detailed description of the proposed bargaining unit, including job titles and classifications;
- 5) the number of employees in the proposed bargaining unit;
- 6) the date of posting; and
- 7) the signature of the employer's representative.
- e) The notice shall remain posted for a period of 20 days. The employer shall take steps reasonably necessary to insure that the notice is not removed or defaced.
- f) During the 20-day posting period, any competing labor organization may file a petition with the Board seeking to represent all or some of the employees in the unit. Prior to, or simultaneously with its filing with the Board, the competing organization shall serve the petition on the employer and the labor organization that was to have been voluntarily recognized. The petition shall be on a form developed by the Board and shall contain:
 - 1) the name, address, telephone number and affiliation, if any, of the labor organization;
 - 2) the name, address, telephone number and signature of petitioner's representative;
 - 3) the names of the employer and labor organization that the employer intended to voluntarily recognize, and the names and addresses of the employer and labor organization representatives;
 - 4) a specific and detailed description of the proposed bargaining units, including job titles and classifications to the extent known, proposed by the petitioner and on the voluntary recognition notice and designate any positions included in both units;
 - 5) the date the voluntary recognition notice was posted; and
 - 6) the date the posting period is scheduled to terminate.
- g) A competing labor organization's petition must be supported by a showing of interest of at least 10 percent of the employees in an appropriate bargaining unit which includes all or some of the employees in the unit that was to have been voluntarily recognized. (Section 9(g) of the Act.)
- h) Upon the filing of a competing labor organization's petition and proper showing of interest, the Board shall treat the voluntary recognition proceeding as a representation proceeding. The Board shall proceed in accordance with Section 9(a) of the Act and Sections 1210.80 through 1210.150 of this Part.
- i) If no competing labor organization petitions have been filed with the Board by the termination of the posting period, the employer and the labor organization shall file with the Board a certification of posting. This certification of posting shall be on a form developed by the Board. The certification of posting shall contain the following:
 - 1) the Board case number assigned to the request for voluntary recognition and date filed;
 - 2) the name, address and telephone number of the employer;

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

- 3) the name, address, telephone number and affiliation, if any, of the labor organization;
- 4) the names, addresses and telephone numbers of the parties' representatives;
- 5) a specific and detailed description of the proposed bargaining unit, including job titles and classifications;
- 6) the number of employees in the proposed bargaining unit;
- 7) the dates, locations and termination date of the posting of the voluntary recognition notice;
- 8) a statement that the notice was not removed or defaced during the posting period;
- 9) a statement that the parties desire certification of the voluntary recognition issue; and
- 10) a statement that no intervening petition was filed.
- j) The Board will investigate the employer-labor organization voluntary recognition certification request.
 - 1) If the Board concludes that the labor organization represents a majority of the employees in an appropriate bargaining unit, and that the petition is otherwise consistent with the Act and this Part, the Board shall certify the employee organization as the exclusive representative of the employees.
 - 2) If the Board determines that there is insufficient evidence to support the claim of majority status, that the proposed bargaining unit is not appropriate, or that the petition otherwise contravenes the Act or this Part, the Board shall dismiss the petition without prejudice to the filing of a representation petition by either the employer or the labor organization or the commencement of voluntary recognition proceedings in an appropriate unit in which the labor organization has majority status.
- k) If, after the Board directs an election in a representation proceeding, the employer decides to voluntarily recognize the labor organization, the Request for Voluntary Recognition must be filed within 14 days after service of the Board's Direction of Election. Within seven days after receipt of the Request, if the Board determines that there is insufficient evidence to support the claim of majority status, an election shall be scheduled as expeditiously as possible.

(Source: Amended at 17 Ill. Reg. 15612, effective September 13, 1993)

Section 1210.170 Petitions for Amendment or Clarification of the Bargaining Unit

- a) An exclusive representative or an employer may file a petition to clarify or amend an existing bargaining unit. The petition shall be served on the other party by the Board. The petition shall be signed

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

and shall contain the following:

- 1) the name, address and telephone number of the employer;
 - 2) the name, address and telephone number of petitioner's representative;
 - 3) the name, address, telephone number and affiliation, if any, of the exclusive representative;
 - 4) a specific and detailed description of the existing bargaining unit including job titles and classifications; and
 - 5) the nature of the proposed amendment or clarification and the reasons therefor.
- b) Following the filing of a petition to amend or clarify an existing unit, the Board shall provide the employer with a notice which shall be posted on bulletin boards and other places where notices for employees in the bargaining unit are customarily posted. Notice shall remain posted for at least 20 days.
- c) The respondent may file an answer to the petition within 20 days following service of the petition.
- d) The Board or its agent shall investigate the petition and, if necessary, set it for hearing.

1) Interested persons desiring to intervene in the hearing shall submit a written request to the administrative law judge hearing officer. The administrative law judge hearing officer shall have discretion to grant or deny intervention. The decision shall be based upon the interests of the intervenor, whether those interests will be adequately protected by existing parties, and the timeliness of the intervenor's request.

2) The administrative law judge hearing officer may schedule a prehearing conference or request prehearing briefs when it appears to the hearing officer that such would expedite the procedure.

3) The administrative law judge hearing officer shall inquire into all matters in dispute and shall obtain a full and complete record. Following the close of the hearing, the administrative law judge hearing officer shall file and serve upon the parties a recommended disposition of the matter.

4) Exemptions.

A) Parties may file exceptions to the administrative law judge's hearing officer's recommendation and briefs in support of their exceptions no later than 14 days after service of the recommendation. Parties may file responses to exceptions and briefs in support of the responses, no later than 10 days after service of the exceptions. Each party shall serve its exceptions, responses and briefs on the other parties. Parties desiring oral argument before the Board shall request oral argument and provide the reasons for the requests in their exceptions or responses. The Board will grant or deny requests for oral argument depending upon the significance, complexity and novelty of

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

the issues. If no exceptions have been filed within the 14-day period, the parties will be deemed to have waived their exceptions.

- B) Each exception
- i) shall set forth specifically the questions of procedure, fact, law, or policy to which exceptions are taken;
 - ii) shall identify that part of the administrative law judge's hearing officer's opinion or decision to which objection is made; and
 - iii) shall state the grounds for the exceptions and shall include the citation of authorities unless set forth in a supporting brief.
- C) Any exception to ruling, finding, conclusion, or recommendation which is not specifically urged shall be deemed to have been waived. Any exception which fails to comply with the foregoing requirements may be disregarded.
- D) Any brief in support of exceptions shall be confined to the scope of the exceptions and shall contain, in the order indicated, the following:

i) A clear and concise statement of the case containing all that is material to the consideration of the questions presented.

ii) A specification of the questions involved and to be argued.

iii) The argument, presenting clearly the points of fact and law relied upon in support of the position taken on each question.

E) Briefs in support of responses to exceptions shall be limited to the questions raised in the exceptions and in the brief in support thereof. It shall present clearly the points of fact and law relied upon in support of the position taken on each question.

5) The Board will review the administrative law judge's hearing officer's recommendation upon request of a party or on its own motion. The Board may adopt all, part, or none of the recommendation.

e) The parties may stipulate to an amendment or clarification of the bargaining unit. The stipulation shall be filed with the Board. A notice of the stipulation shall be posted on bulletin boards and at other places where notices for employees in the bargaining unit are customarily posted. The notice shall advise employees of the terms of the stipulation and direct persons objecting to the stipulation to file objections with the Board. The notice shall remain posted for at least 20 days. The employer shall take reasonable steps to insure that the notice is not removed or defaced during the posting period.

f) During any posting period under this Section, interested parties may file objections with the Board. Objections shall be served on the

STATE OF ILLINOIS
ILLINOIS STATE LABOR RELATIONS BOARD
NOTICE OF ADOPTED AMENDMENTS

NOTICE OF ADOPTED AMENDMENT(S)

employer and the exclusive representative prior to, or simultaneously with, their filing with the Board. If objections are not timely filed and/or properly served, the objections shall be deemed waived.

- g) Following the posting period, if no objections have been filed, the Board shall approve or disapprove the amendment or clarification depending upon whether the amendment or clarification is consistent with the Act. If objections have been filed, the Board shall proceed in accordance with Section 1210.170(d) of this Part.

(Source: Amended at 17 Ill. Reg. 15612, effective September 13, 1993)

Section 1210.180 Petitions to Amend Certification

- a) An exclusive representative shall file a petition with the Board to amend its certification whenever there is a change in its name or structure. An employer or exclusive representative shall file a petition to amend a unit certification whenever there is a change in the structure of the unit's employing entity. The petition shall be served by the Board on the any employer, or exclusive representative, who is not the petitioner. The petition shall be signed, under penalty of perjury, and shall contain:

- 1) the name, address and telephone number of the employer;
- 2) the name, address, telephone number and affiliation, if any, of the exclusive representative, as certified by the Board;
- 3) the name, address and telephone number of petitioner's representative;
- 4) a description of the proposed amendment; and
- 5) the reasons for the proposed amendment.

- b) The employer shall post a notice of the proposed amendment in accordance with Section 1210.170(b) of this Part.

- c) Interested persons, including the employer, may file objections to the proposed amendment with the Board during the posting period. Objections shall be served on the exclusive-representative petitioner prior to, or simultaneously with, filing with the Board.

- d) If, at the conclusion of the posting period, no objections have been filed, the Board may approve or disapprove the amendment or take any other action on it necessary to effectuate the purposes and policies of the Act.

- e) If objections have been filed during the posting period, the Board shall proceed in accordance with Section 1210.170(d) of this Part.

(Source: Amended at 17 Ill. Reg. 15612, effective September 13, 1993)

- 1) HEADING OF THE PART: Unfair Labor Practice Proceedings

- 2) CODE CITATION: 80 Ill. Adm. Code 1220

- 3) SECTION NUMBERS:

1220.10
1220.30
1220.40
1220.50
1220.60
1220.70
1220.80
1220.90
1220.100

- ADOPTED ACTION:

Amendment
Amendment
Amendment
Amendment
Amendment
New, Renumbered
New
Renumbered

- 4) STATUTORY AUTHORITY:

Illinois Public Labor Relations Act (Ill. Rev. Stat. 1991, ch. 48, pars. 1610, 1611 and 1605(i)) [5 ILCS 315/10, 11 and 50 (1992)]

- 5) EFFECTIVE DATE OF AMENDMENTS: September 13, 1993

- 6) DOES THIS RULEMAKING CONTAIN AN AUTOMATIC REPEAL DATE? No

- 7) DO THESE AMENDMENTS CONTAIN INCORPORATIONS BY REFERENCE? No

- 8) DATE FILED IN AGENCY'S PRINCIPAL OFFICE: August 26, 1993

- 9) NOTICE OF PROPOSAL PUBLISHED IN ILLINOIS REGISTER:

March 26, 1993, 17 Ill. Reg. 3755

- 10) HAS JCAR ISSUED A STATEMENT OF OBJECTIONS TO THESE RULES: No

- 11) DIFFERENCES BETWEEN PROPOSAL AND FINAL VERSION:

Section 1220.50(i) was added:

STATE OF ILLINOIS
ILLINOIS STATE LABOR RELATIONS BOARD
NOTICE OF ADOPTED AMENDMENTS

At any time prior to the issuance of the recommended decision and order, a party may move to disqualify the administrative law judge on the grounds of bias or conflict of interest. Such motion shall be in writing to the General Counsel, with a copy to the administrative law judge, setting out the specific instances of bias or conflict of interest. An adverse decision or ruling, in and of itself, is not grounds for disqualification. The General Counsel may decline to disqualify the administrative law judge or appoint another administrative law judge to hear the case.

- 12) HAVE ALL THE CHANGES AGREED UPON BY THE AGENCY AND JCAR BEEN MADE AS INDICATED IN THE AGREEMENT LETTER ISSUED BY JCAR? Yes
- 13) WILL THESE AMENDMENTS REPLACE AN EMERGENCY RULE (AMENDMENT, REPEALER) CURRENTLY IN EFFECT? No
- 14) ARE THERE ANY AMENDMENTS PENDING ON THIS PART? No
- 15) SUMMARY AND PURPOSE OF AMENDMENTS:

The amendments to this Part were made to accurately reflect the Boards' current practices associated with the appointment of counsel, to indicate the length of time parties have to file responses to an appeal of the executive director's dismissal, to clarify Section 1220.40, to state the general counsel's authority when an administrative law judge becomes unavailable to the Board, to provide for a compliance procedure and to provide for the standards to be employed by the Boards when considering motions for sanctions.

- 16) INFORMATION AND QUESTIONS REGARDING THESE ADOPTED AMENDMENTS SHALL BE DIRECTED TO:

Lydia Mills Wendt
Deputy General Counsel
Illinois State Labor Relations Board
320 West Washington Street, Suite 500
Springfield, IL 62701

THE FULL TEXT OF THE ADOPTED AMENDMENTS BEGINS ON THE NEXT PAGE:

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

TITLE 80: PUBLIC OFFICIALS AND EMPLOYERS

SUBTITLE C: LABOR RELATIONS

CHAPTER IV: ILLINOIS STATE LABOR RELATIONS BOARD/

ILLINOIS LOCAL LABOR RELATIONS BOARD

PART 1220

UNFAIR LABOR PRACTICE PROCEEDINGS

Section

1220.10 General Statement of Purpose

1220.20 Filing of a Charge

1220.30 Appointment of Counsel

1220.40 Charge Processing and Investigation, Complaints and Responses

1220.50 Hearings

1220.60 Consideration by the Board

1220.70 Requests for Preliminary Relief

1220.80 Unfair Labor Practice Charges-Involving Fair Share Fees - ~~Compilations~~

Procedures

1220.90 Sanctions

1220.100 Unfair Labor Practice Charges Involving Fair Share Fees

TABLE A "Adjusted Income" Standards for Appointment of Counsel in Unfair Labor Practice Cases

AUTHORITY: Implementing Sections 10 and 11 and authorized by Section 5(i) of the Illinois Public Labor Relations Act (Ill. Rev. Stat. 1991, ch. 48, pars. 1610, 1611, and 1605(i)) [5 ILCS 315/10, 11, 5(i)].

SOURCE: Emergency rule adopted at 8 Ill. Reg. 16043, effective August 22, 1984, for a maximum of 150 days; adopted at 9 Ill. Reg. 1898, effective January 25, 1985; amended at 11 Ill. Reg. 6481, effective March 27, 1987; amended at 12 Ill. Reg. 20122, effective November 18, 1988; amended at 14 Ill. Reg. 19959, effective November 30, 1990; amended at 17 Ill. Reg. 15628, effective September 13, 1993.

Section 1220.10 General Statement of Purpose

The regulations contained in this Part detail the procedures for initiating, processing and resolving charges that an employer or a labor organization has committed, or is committing, an unfair labor practice in violation of Sections 10(a) and 10(b) of the "Illinois Public Labor Relations Act" ("Act") (Ill. Rev. Stat. 1989 1991, ch. 48, pars. 1601 et seq.) [5 ILCS 315].

(Source: Amended at 17 Ill. Reg. 15628, effective September 13, 1993)

Section 1220.30 Appointment of Counsel

- a) A charging party may file a request for appointment of counsel

NOTICE OF ADOPTED AMENDMENT(S)

simultaneously with or after filing a charge. The request shall be on a form developed by the Board. It shall be accompanied by an affidavit attesting to the charging party's *inability to pay or inability to otherwise provide for adequate representation*. (Section 5(k) of the Act). It shall also be accompanied by affidavits, documents or other evidence supporting the charge.

b) A charging party shall be deemed unable to pay or provide for adequate representation if the party's ~~higher~~ "Adjusted Income" is less than the amount set forth in Table A to this part for a "Family Unit" of the applicable size, and if this person ~~he/she~~ is not entitled to representation from a labor organization (or such representation would be inappropriate) or under the provisions of a prepaid legal services plan or similar arrangement. As an example, instances when representation by a labor organization would be inappropriate include when an individual files charges against a labor organization.

c) For purposes of this Section, "Adjusted Income" refers to all gross income available to the charging party for the prior year from wages, pensions, annuities, insurance or public assistance benefits, interest and dividends, and other such sources, including liquid assets such as savings and checking accounts, stocks, bonds and similar investments, less the following deductions for the prior year:

- 1) Child care and court-ordered child support payments;
- 2) That portion of educational and medical expenses which exceeds five percent of total gross income;
- 3) Unreimbursed expenses of obtaining and maintaining employment; and
- 4) An amount equivalent to 20 percent of wages earned, to approximate withholding for taxes and social security and the like.

d) For purposes of this Section, "Family Unit" means the charging party and all other persons related to the charging party by blood, marriage or adoption who reside in the charging party's household and are dependent upon the charging party for at least one half of their support.

e) If the Board or its designated representative determines that the charging party is unable to pay or is otherwise unable to provide for adequate representation, and that the charge is not clearly without merit, the charging party Board shall select appoint counsel to represent the charging party in the proceedings from a list of attorneys maintained by the Board.

f) Counsel selected appointed by the charging party Board to represent the charging party in such a case shall certify to the Board:

- 1) That they are ~~he-or-she-is~~ licensed to practice law in Illinois under the rules of the Illinois Supreme Court (Ill. Rev. Stat. 1989 1991, ch. 110A, pars. 701 et seq.).
- 2) That they have ~~he-or-she-has~~ previous experience as the representative of parties in the trial or hearing of contested cases. An attorney without trial experience, including a law

NOTICE OF ADOPTED AMENDMENT(S)

student certified to practice under Rule 711 of the Illinois Supreme Court, shall satisfy this requirement if actively supervised and accompanied at hearing by an attorney with previous trial experience, in which case the supervising attorney shall make the certification.

3) That they ~~he-or-she~~ accept appointment in return for compensation from the Board at the rate of 50 dollars per hour (30 dollars per hour for the time of law students and paralegals) plus costs, i.e., copying documents, subpoena fees, and subject to a maximum compensation limit of 3500 dollars in any single cause. The maximum limit of 3500 dollars may be increased in a particular case upon application to the Board if the circumstances of the case, including the number and complexity of the issues, demand the investment of time and expenses exceeding the limitation.

4) That they ~~he-or-she~~ will maintain contemporaneous, careful records of time and expenses devoted to the case and will supply copies or summaries to the Board, together with bills for services rendered, at least monthly for each month in which time or costs are accrued.

g) Payment for personal services at the hourly rate is due upon completion of the Board proceedings in the cause. Payment of costs up to a total of 500 dollars are payable on a monthly basis for the month in which the costs are incurred. Costs totalling more than 500 dollars are payable at the completion of the proceedings before the Board and may be incurred only with prior approval of the Board e.g., in instances in which issues presented are numerous or call for numerous witnesses.

h) An attorney appointed by the Board to represent a charging party pursuant to this Section shall not withdraw from such employment without approval of the Board or its administrative law judge hearing officer.

(Source: Amended at 17 Ill. Reg. 15628, effective September 13, 1993.)

Section 1220.40 Charge Processing and Investigation, Complaints and Responses

a) Upon receipt of a charge, the Board or its Executive Director shall review the charge to determine whether the charge was filed in accordance with the Act. If the review reveals that the charge was not filed in accordance with the Act, the charge shall be summarily dismissed. Notice of dismissal shall state the reasons therefor, and be served upon the respondent and the charging party. If the charge is dismissed by the Executive Director of the Board, the charging party may appeal the dismissal to the Board. Notice of appeal and all supporting materials shall be filed with the General Counsel no later than 10 days after service of the notice of dismissal.

b) The Board or its designated representative shall investigate the

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

charge. The investigation may include an investigatory conference with the parties.

- 1) The charging party shall submit to the Board or its designated representative all evidence relevant to or in support of the charge. Such evidence may include documents and affidavits.
- 2) Upon request by the Board or its designated representative, the respondent may submit a complete account of the facts, a statement of its position in respect to the allegations set forth in the charge and all relevant evidence in support of its position. Such evidence may include documents and affidavits.
- 3) If the investigation reveals that the charge involves an issue of law or fact (Ill. Rev. Stat. 1987 1991, ch. 48, par. 1611(a)) [5 ILCS 315/11(a)] sufficient to warrant a hearing, the Board or its designated representative shall issue a complaint for hearing. The complaint shall state the issues that warrant a hearing and shall be served on the respondent and the charging party.
- 4) If the investigation reveals that there is not an issue of law or fact sufficient to warrant a hearing, the Board or its Executive Director shall dismiss the charge. Notice of dismissal shall state the reasons therefor, and be served on the respondent and the charging party. If the charge is dismissed by the Executive Director of the Board, the charging party may appeal the dismissal to the Board. Notice of appeal and all supporting materials shall be filed with the General Counsel no later than 10 days after service of the notice of dismissal. Parties may file responses to the appeal and all materials in support of the responses no later than five days after service of the appeal.

c) Whenever a complaint for hearing is issued, the respondent must file an answer within 15 days after service of the complaint.

- 1) The answer shall include a specific admission, denial or explanation of each allegation or issue of the complaint or, if the respondent is without knowledge thereof, it shall so state and such statement shall operate as a denial. Admissions or denials may be made to all or part of an allegation but shall fairly meet the circumstances of the allegation.
- 2) The answer shall also include a specific, detailed statement of any affirmative defenses including, but not limited to, allegations that the violation occurred more than six months before the charge was filed, that the Board lacks jurisdiction over the matter, or that the complaint fails to allege an unfair labor practice.
- 3) Parties who fail to file timely answers shall be deemed to have admitted the material facts alleged in the complaint and to have waived their rights to a hearing. The failure to answer any allegation shall be deemed an admission of that allegation. Filing of a motion will not stay the time for filing an answer.

(Source: Amended at 17 Ill. Reg. 15628, effective

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

September 13, 1993)

Section 1220.50 Hearings

- a) Upon the issuance of a complaint for hearing, the Board shall set the matter for hearing before a an administrative law judge hearing officer. The hearing shall be set not less than five days after serving of such complaint. (Section 11(a) of the Act).
- b) Interested persons who wish to intervene in the hearing shall direct such requests to the administrative law judge hearing officer. The request shall be in writing and shall state the grounds for intervention. The administrative law judge hearing officer shall have discretion to grant or deny the request for intervention. The decision shall be based upon the interests of the intervenor, whether those interests will be adequately protected by existing parties, and the timeliness of the intervenor's request.
- c) The administrative law judge hearing officer may schedule a prehearing conference when it appears to the hearing officer that such a conference would expedite the procedure.
- d) Intermediate rulings of the administrative law judge hearing officer shall not be subject to interlocutory appeal. Parties may raise objections to such intermediate rulings in their exceptions to the administrative law judge hearing officer's recommended decision.
- e) The charging party shall present the case in support of the charge.
- f) The respondent may present evidence in defense against the charges.
- f) The administrative law judge, on the judge's own motion or on the motion of a party, may amend a complaint before the hearing concludes to conform to the evidence presented in the hearing.
- g) The administrative law judge hearing officer shall inquire fully into all matters in dispute, and shall obtain a full and complete record either by evidentiary hearing and/or stipulation. After the close of the hearing, the administrative law judge hearing officer shall file and serve on the parties a recommended decision.
- h) In the event the administrative law judge designated to conduct the hearing becomes unavailable to the Board after the hearing has been opened, for reasons including but not limited to death or resignation, the General Counsel or the General Counsel's agent shall designate another administrative law judge for the purpose of further hearing or the appropriate action.
- i) At any time prior to the issuance of the recommended decision and order, a party may move to disqualify the administrative law judge on the grounds of bias or conflict of interest. Such motion shall be in writing to the General Counsel, with a copy to the administrative law judge, setting out the specific instances of bias or conflict of interest. An adverse decision or ruling, in and of itself, is not grounds for disqualification. The General Counsel may decline to disqualify the administrative law judge or appoint another administrative law judge to hear the case.

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

(Source: Amended at 17 Ill. Reg. 15628, effective September 13, 1993)

Section 1220.60 Consideration by the Board

a)†† No later than 30 days after service of the recommended decision and order, parties may file exceptions to the administrative law judge's hearing-officer's recommendation and briefs in support of those exceptions. A party not filing timely exceptions waives its right to object to the administrative law judge's hearing-officer's recommended decision and order. Unless overturned by the Board, the parties shall comply with the recommended decision and order. Parties may file responses to exceptions and briefs in support of the responses no later than 15 days after service of the exceptions. Each party shall serve its exceptions, responses, and briefs on the other parties. Parties desiring oral argument before the Board shall request oral argument and state the reasons for the requests in their exceptions and responses.

1)††† Each exception

A)†† shall set forth specifically the questions of procedure, fact, law, or policy to which exceptions are taken;

B)†† shall identify that part of the administrative law judge's hearing-officer's opinion or decision to which objection is made; and

C)††† shall state the grounds for the exceptions and shall include the citation of authorities unless set forth in a supporting brief. Any exception to a ruling, finding, conclusion, or recommendation which is not specifically urged shall be deemed to have been waived.

2)†† Any exception which fails to comply with the foregoing requirements may be disregarded.

3) Any brief in support of exceptions shall be confined to the subjects-raised-in scope of the exceptions and shall contain, in the order indicated, the following:

A) A clear and concise statement of the case containing all that is material to the consideration of the questions presented.

B) A specification of the questions involved and to be argued.

C) The argument, presenting clearly the points of fact and law relied upon in support of the position taken on each question.

4) Briefs in support of responses to exceptions shall be limited to the questions raised in the exceptions and in the brief in support thereof. It shall present clearly the points of fact and law relied upon in support of the position taken on each question.

b) The Board will review the administrative law judge's hearing-officer's recommended decision and order upon timely filing of exceptions

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

request-by-a-party or at any time on its own motion. The Board may adopt all, part or none of the recommendation depending on the extent to which it is consistent with the record and applicable law. The Board shall issue and serve on all parties its decision and order. The Board will retain jurisdiction over the case to ensure the parties' compliance with the Board order.

(Source: Amended at 17 Ill. Reg. 15628, effective September 13, 1993)

Section 1220.70 Requests for Preliminary Relief

The charging party may request the Board to seek preliminary relief pursuant to Section 11(b) of the Act. The charging party shall have the burden of demonstrating to the General Counsel Board that if preliminary relief is not sought it will suffer irreparable harm and that the remedies available from the Board will be inadequate. Any request to seek such preliminary relief shall be in writing and accompanied by affidavits, documents or other evidence supporting the request. All requests shall be filed with the General Counsel and shall be served on the other party simultaneously with their filing with the Board.

(Source: Amended at 17 Ill. Reg. 15628, effective September 13, 1993)

Section 1220.80 Unfair-labor-Practice--Changes-involving-Fair--Share-Fees Compliance Procedures

a) Whenever it is determined that an unfair labor practice has been committed, a copy of the Board's decision and order, or a copy of the administrative law judge's recommended decision and order in cases where the Board has declined to review such recommended decision and order, shall be sent to the compliance officer who shall be responsible for monitoring the respondent's compliance therewith:

b) Parties may request that the Board seek enforcement of the Board's order pursuant to Section 11(f) of the Act. Such requests shall be in the form of a petition for enforcement filed with the Board and served upon the other parties. The petition shall set forth specifically the manner in which the respondent has failed to voluntarily comply with the Board's order, or administrative law judge's recommended order in cases where the Board has declined to review such order.

c) The compliance officer shall investigate the information in the petition and shall issue and serve upon the parties, no later than 30 days after the filing of the petition, an order dismissing the petition, directing specifically the actions to be taken by the respondent or setting the matter for hearing before an administrative law judge.

d) No later than seven days after service of the compliance officer's

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

NOTICE OF ADOPTED AMENDMENT(S)

order dismissing the petition or directing action by the respondent, the parties may file objections to the compliance order. The objections shall:

- 1) set forth specifically the finding, order or omission to which the objection is taken; and
- 2) set forth specifically the grounds for the objection, and be accompanied by any available supporting documentation and requests for subpoenas.

e) Any objection to a finding, order or omission not specifically urged shall be deemed waived. In the event that objections are filed by any party, the Board shall set the matter for hearing before an administrative law judge.

f) The administrative law judge shall, with or without an evidentiary hearing, inquire fully into all issues raised by the objections and shall issue and serve upon the parties a recommended compliance decision and order.

- 1) No later than 10 days after service of the recommended compliance decision and order, the parties may file and serve upon the other parties, exceptions to the recommendation and briefs in support of those exceptions. Parties may file and serve upon the other parties responses to the exceptions and briefs in support of the responses no later than 10 days after service of the exceptions. Such exceptions, responses and briefs shall comply with and be governed by Section 1220.60(a)(1), (2) and (3) of this Part.

2) The Board will review the administrative law judge's recommended decision and order upon timely request by a party or at any time on its own motion. The Board may adopt all, part or none of the recommendation depending on the extent to which it is consistent with the record and applicable law. The Board shall issue and serve on all parties its decision and order.

g) All proceedings under this Section shall be suspended during the pendency of any appeal from the Board's decision finding a violation of the Act.

(Source: Former 1220.80 renumbered to 1220.100, new Section added at 17 Ill. Reg. 15628, effective September 13, 1993.)

Section 1220.90 Sanctions

a) The Board's order may, in its discretion include an appropriate sanction, based on the Board's rules and regulations, if the other party has made allegations or denials without reasonable cause and found to be untrue or has engaged in frivolous litigation for the purpose of delay or needless increase in the cost of litigation. The State of Illinois or any agency thereof shall be subject to these provisions in the same manner as any other party. (Section 11 of the Act)

b) The Board may award sanctions for such written or recorded allegations or denials including statements recorded during the course of Board proceedings.

c) The sanction may include an admonition or reprimand; striking an offending allegation or denial; an order to pay the other party or parties' reasonable expenses including costs and reasonable attorney's fees or an appropriate portion thereof; and/or any other appropriate sanction. (Section 11 of the Act) Sanctions are to be awarded only against a party or parties to the proceeding.

d) Any party to an unfair labor practice proceeding may move for sanctions. The motion for sanctions must be a succinct statement identifying the allegations and/or denials and/or incidents of frivolous litigation alleged to be subject to sanctions, with citations to the record, and succinct arguments. (Section 11 of the Act) The party subject to the motion for sanctions shall have 14 days after service of the motion to respond or withdraw the paper or position that is the basis of the motion. Neither the motion for sanctions nor the response may be used as an additional brief on the merits of the underlying case.

1) Motions for sanctions may be filed with the Executive Director while an unfair labor practice charge is pending before the Executive Director. Such motions shall be filed no later than seven days after receipt of the Executive Director's notice that investigation of the unfair labor practice charge has been completed, or that a party has withdrawn the unfair labor practice charge. Sanctions before the Executive Director may only be sought for instances of frivolous litigation.

2) Once an unfair labor practice complaint has been issued, motions for sanctions may be filed with the administrative law judge. Such motions shall be filed no later than seven days after receipt of the last post-hearing brief scheduled to be filed, or no later than seven days after the close of the hearing, if no briefs are to be filed. Sanctions before the administrative law judge may be sought for both allegations or denials made without reasonable cause and found to be untrue and/or instances of frivolous litigation. (Section 11 of the Act)

3) Once the administrative law judge has issued a recommended decision and order, or the Executive Director has issued a recommended decision and order dismissing an unfair labor practice charge, the recommended decision and order is pending before the Board. Such motions shall be filed no later than seven days after receipt of the last brief scheduled to be filed with the Board, or no later than seven days after oral argument before the Board, if such argument occurs after all briefing is completed. Sanctions before the Board may be sought for both allegations or denials made without reasonable cause and found to be untrue and/or instances of frivolous litigation. (Section 11 of the Act)

ILLINOIS REGISTER

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

- e) A party may request sanctions from the Board for an allegation or denial made without reasonable cause and found to be untrue even though it did not move for sanctions on that allegation or denial before the administrative law judge, and even though the administrative law judge did not recommend sanctions on such allegation or denial. (Section 11 of the Act)
- f) A party may not request sanctions from the Board for alleged frivolous litigation for the purpose of delay or needless increase in the cost of litigation before the Executive Director or administrative law judge, unless it requested sanctions from the Executive Director or administrative law judge as to such alleged incident of frivolous litigation, or unless the Executive Director or administrative judge recommended sanctions as to such alleged incident of frivolous litigation. (Section 11 of the Act)
- g) Except as provided in subsection (h) below, an order for sanctions shall be included in the Executive Director's recommended decision and order, the administrative law judge's recommended decision and order, or the Board opinion and order.
- h) If neither party has moved for sanctions, the Executive Director, administrative law judge, or Board may sua sponte issue an order to show cause why this rule has been violated. The party or parties to whom the order to show cause is directed shall have 14 days from the service of that order to file a response. The order to show cause shall recite the conduct or circumstances at issue.
- i) An order leveling sanctions shall recite the conduct or circumstances for which sanctions are sought, and explain the basis for the sanction imposed.

(Source: Added at 17 Ill. Reg. 15628, effective September 13, 1993.)

Section 1220.100 Unfair Labor Practice Charges Involving Fair Share Fees

- a) Unfair labor practice charges that proportionate share fees violate the Act shall be filed and processed in accordance with this Part.
- b) The Board shall consolidate charges involving proportionate share fees in accordance with 80 Ill. Adm. Code 1200.105. Specifically, the Board shall consolidate in a single proceeding all proportionate share fee charges involving the same bargaining unit. The Board shall consolidate charges involving two or more bargaining units whenever it determines that the exclusive representatives are affiliated with a common employee organization, the exclusive representatives use similar methods for determining fair share fees, the consolidation would not prejudice the constitutional and statutory rights of the objecting employees, and the consolidation would resolve the charges in an efficient manner.
- c) In hearing on fair share fee charges, the exclusive representative shall have the burden of proving how the fair share fee was calculated

ILLINOIS REGISTER

ILLINOIS STATE LABOR RELATIONS BOARD/
ILLINOIS LOCAL LABOR RELATIONS BOARD

NOTICE OF ADOPTED AMENDMENT(S)

and that the fee did not exceed the employee's proportionate share of the costs of the collective bargaining process, contract administration and pursuing matters affecting wages, hours and conditions of employment. (Sections 3(g) and (e) of the Act):

(Source: Section 1220.100 renumbered from 1220.80 at 17 Ill. Reg. 15628, effective September 13, 1993.)

POLLUTION CONTROL BOARD

NOTICE OF ADOPTED AMENDMENTS

- 1)

Heading of the Part: HAZARDOUS WASTE INJECTION RESTRICTIONS
- 2)

Code Citation: 35 Ill. Adm. Code 738
- 3)

Section Numbers:

738.101

Amendment

738.117

New Section
- 4)

Statutory Authority: Ill. Rev. Stat. 1991, ch. 111½, pars. 1013, 1022.4 and 1027 [415 ILCS 5/13, 5/22.4 and 5/27].
- 5)

Effective Date of amendments: September 14, 1993
- 6)

Does this rulemaking contain an automatic repeal date? No.
- 7)

Do these amendments contain incorporations by reference? No.
- 8)

Date filed in Board's principal office: Order adopted August 5, 1993.
- 9)

Notice of Proposal Published in Illinois Register:

June 11, 1993, 17 Ill. Reg. 8423
- 10)

Has JCAR issued a Statement of Objections to these rules? No.

Section 13(c) of the Environmental Protection Act (Ill. Rev. Stat. 1991, ch. 111½, par. 1013(c) [415 ILCS 5/13(c)]) provides that Section 5 of the Administrative Procedure Act shall not apply. Because this rulemaking is not subject to Section 5 of the APA, it is not subject to first notice or to second notice review by JCAR.

11)

Differences between proposal and final version:

Section 738.101(d)(1) & (d)(2)

language added and revised

Section 738.117

Section number corrected

Section 738.117 Board Note

reference to the Federal Register corrected

12)

Have all the changes agreed upon by the Board and JCAR been made as indicated in the agreement letter issued by JCAR?

Section 13(c) of the Environmental Protection Act provides that Section 5 of the Administrative Procedure Act shall not apply. Because this rulemaking is not subject to Section 5 of the APA, it is not subject to first notice or to second notice review by JCAR.

13)

Will these amendments replace an emergency amendments currently in effect? No.

14)

Are there any other amendments pending on this Part? No.

15)

Summary and Purpose of amendments:

A more detailed description is contained in the Board's opinion of August 5, 1993 in R93-6, which Opinion is available from the address below. Section 13(c) of the Environmental Protection Act provides that Section 5 of the Administrative Procedure Act shall not apply. Because
- 16)

Information and questions regarding this adopted amendments shall be directed to:
- Michael J. McCambridge

Attorney

Illinois Pollution Control Board

100 W. Randolph 11-500

Chicago, IL 60610

312-814-6924
- The full text of the adopted amendments begins on the next page:

POLLUTION CONTROL BOARD

NOTICE OF ADOPTED AMENDMENTS

TITLE 35: ENVIRONMENTAL PROTECTION

SUBTITLE G: WASTE DISPOSAL

CHAPTER I: POLLUTION CONTROL BOARD

SUBCHAPTER d: UNDERGROUND INJECTION CONTROL AND UNDERGROUND STORAGE TANK PROGRAMS

PART 738

HAZARDOUS WASTE INJECTION RESTRICTIONS

SUBPART A: GENERAL

Purpose Scope and Applicability

Definitions
 Dilution Prohibited as a Substitute for Treatment
 Case-by-Case Extensions of an Effective Date
 Waste Analysis

Section
 738.101
 738.102
 738.103
 738.104
 738.105

SUBPART B: PROHIBITIONS ON INJECTION

Waste Specific Prohibitions - Solvent Wastes
 Waste Specific Prohibitions - Dioxin-Containing Wastes
 Waste Specific Prohibitions - California List Wastes
 Waste Specific Prohibitions - First Third Wastes
 Waste Specific Prohibitions - Second Third Wastes
 Waste Specific Prohibitions - Third Third Wastes
 Waste Specific Prohibitions - Newly-Listed Wastes

Section
 738.110
 738.111
 738.112
 738.113
 738.114
 738.115
 738.116
 738.117

SUBPART C: PETITION STANDARDS AND PROCEDURES

Petitions to Allow Injection of a Prohibited Waste
 Required Information to Support Petitions
 Submission, Review and Approval or Denial of Petitions
 Review of Adjusted Standards
 Termination of Adjusted Standards

Section
 738.120
 738.121
 738.122
 738.123
 738.124

AUTHORITY: Implementing Section 13 and 22.4 and authorized by Section 27 of the Environmental Protection Act (Ill. Rev. Stat. 1991, ch. 111-1/2, pars. 1013, 1022.4 and 1027) [415 ILCS 5/13, 22.4 and 27].

SOURCE: Adopted in R89-2 at 14 Ill. Reg. 3059, effective February 20, 1990; amended in R89-11 at 14 Ill. Reg. 11948, effective July 9, 1990; amended in R90-14 at 15 Ill. Reg. 11425, effective July 24, 1991; amended in R92-13 at 17 Ill. Reg. 6190, effective April 5, 1993; amended in R93-6 at 17 Ill. Reg. 15641, effective September 14, 1993.

SUBPART A: GENERAL

Section 738.101 Purpose Scope and Applicability

- a) This Part identifies hazardous wastes that are restricted from disposal into Class I hazardous waste injection wells and defines those circumstances under which a waste, otherwise prohibited from injection, may be injected.
- b) The requirements of this Part apply to owners or operators of Class I hazardous waste injection wells used to inject hazardous waste.

POLLUTION CONTROL BOARD

NOTICE OF ADOPTED AMENDMENTS

c) Wastes otherwise prohibited from injection may continue to be injected:

- 1) If an extension from the effective date of a prohibition has been granted pursuant to Section 738.104; or
- 2) If an adjusted standard has been granted in response to a petition filed under Section 738.120; or
- 3) If the waste is generated by a conditionally exempt small quantity generator, as defined in 35 Ill. Adm. Code 721.105.

d) Wastes that are hazardous only because they exhibit a hazardous characteristic, and which are otherwise prohibited from injection under this Part, are not prohibited from injection if the wastes:

- 1) Are disposed into a Class I nonhazardous waste injection well, or a Class I hazardous waste injection well that receives only non-prohibited hazardous wastes, as such are defined under 35 Ill. Adm. Code 730.106(a); and
- 2) Do not exhibit any prohibited characteristic of hazardous waste identified in 35 Ill. Adm. Code 721.Subpart C at the point of injection.

BOARD NOTE: The exemption for injection of diluted hazardous waste in this subsection was the subject of pending litigation in Chemical Waste Management et al. v. USEPA, 976 F.2d 2 (D.C. Cir. 1992), decided September 25, 1992, in the U.S. Court of Appeals for the District of Columbia. The USEPA response to the mandate in this litigation may result in the repeal or modification of 40 CFR 148.1(d), from which this subsection is derived. USEPA responded to the remand by issuing an interim final rule on May 24, 1993, at 58 Fed. Reg. 29860, but that action did not directly affect 40 CFR 148.1. The Board views any federal court decision on the effectiveness or enforceability of the USEPA rule as binding on this subsection.

BOARD NOTE: Derived from 40 CFR 148.1 (19912), as amended at 57 Fed. Reg. 808831963 (July 20, 1992).

(Source: Amended at 17 Ill. Reg. 15641, effective September 14, 1993.)

SUBPART B: PROHIBITIONS ON INJECTION

Section 738.117 Waste Specific Prohibitions - Newly-Listed Wastes

- a) The wastes specified in 35 Ill. Adm. Code 721.Subpart D by the following EPA Hazardous Waste numbers are prohibited from underground injection:

F037
 F038
 K107
 K108
 K109

POLLUTION CONTROL BOARD
NOTICE OF ADOPTED AMENDMENTS

K110
K111
K112
K117
K118
K123
K124
K125
K126
K131
K136
U328
U353
U359

b1 Effective June 30, 1995, the wastes specified in 35 Ill. Adm. Code 721. Subpart D by the following EPA Hazardous Waste numbers are prohibited from underground injection:

K117
K118
K131
K132

c1 The requirements of subsections (a) and (b) above do not apply:

- 1) If the wastes meet or are treated to meet the applicable standards specified in 35 Ill. Adm. Code 728. Subpart D; or
- 2) If an adjusted standard has been granted in response to a petition under Subpart C of this Part; or
- 3) During the period of extension of the applicable effective date, if an extension is granted under Section 738.104.

BOARD NOTE: Derived from 40 CFR 148.17, as added at 57 Fed. Reg. 37263 (Aug. 18, 1992).

(Source: Added at 17 Ill. Reg. 15641, effective September 14, 1993)

ILLINOIS REGISTER
POLLUTION CONTROL BOARD
NOTICE OF ADOPTED AMENDMENTS

- 1) Heading of the Part: UNDERGROUND INJECTION CONTROL OPERATING REQUIREMENTS
- 2) Code Citation: 35 Ill. Adm. Code 730
- 3) Section Numbers: Adopted Action:
730.168 Amendment
- 4) Statutory Authority: Ill. Rev. Stat. 1991, ch. 111½, pars. 1013, 1022.4 and 1027 [415 ILCS 5/13, 5/22.4 and 5/27].
- 5) Effective Date of amendments: September 14, 1993
- 6) Does this rulemaking contain an automatic repeal date? No.
- 7) Do these amendments contain incorporations by reference? No.
- 8) Date filed in Board's principal office: Order adopted August 5, 1993.
- 9) Notice of Proposal Published in Illinois Register:
June 11, 1993, 17 Ill. Reg. 8428
- 10) Has JCAR issued a Statement of Objections to these rules? No.
Section 13(c) of the Environmental Protection Act (Ill. Rev. Stat. 1991, ch. 111½, par. 1013(c) [415 ILCS 5/13(c)]) provides that Section 5 of the Administrative Procedure Act shall not apply. Because this rulemaking is not subject to Section 5 of the APA, it is not subject to first notice or to second notice review by JCAR.
Differences between proposal and final version:
Minor editorial differences: in the Main Source Note, the reference to the Illinois Revised Statutes is changed to the 1991 version, and the Illinois Compiled Statutes reference is added.
Have all the changes agreed upon by the Board and JCAR been made as indicated in the agreement letter issued by JCAR?
- 11) Section 13(c) of the Environmental Protection Act provides that Section 5 of the Administrative Procedure Act shall not apply. Because this rulemaking is not subject to Section 5 of the APA, it is not subject to first notice or to second notice review by JCAR.
Will these amendments replace an emergency amendments currently in effect? No.
- 14) Are there any other amendments pending on this Part? No.
- 15) Summary and Purpose of amendments:
A more detailed description is contained in the Board's opinion of August 5, 1993 in R93-6, which Opinion is available from the address below. Section 13(c) of the Environmental Protection Act provides that Section 5 of the Administrative Procedure Act shall not apply. Because this rulemaking is not subject to Section 5 of the APA, it is not

subject to First Notice or to Second Notice review by JCAR.

This rulemaking updates the Board's UIC rules to correspond with amendments adopted by USEPA which appeared in the Federal Register during the period July 1 through December 31, 1992. During this period, USEPA undertook three distinct actions: a stay of a technical amendment to the Third-Third land disposal restriction rules as they relate to newly-listed wastes, the imposition of land disposal restrictions for newly-listed wastes, and a revision of the testing and monitoring requirements. These necessitated amendments to 35 Ill. Adm. Code 730 and 738. Specifically, the amendments to Part 730 change the testing and monitoring requirements to allow the running of a well casing log on a (less frequent) basis than every five years.

- 16) Information and questions regarding this adopted amendments shall be directed to:

Michael J. McCambridge
Attorney
Illinois Pollution Control Board
100 W. Randolph 11-500
Chicago, IL 60610
312-814-6924

The full text of the adopted amendments begins on the next page:

TITLE 35: ENVIRONMENTAL PROTECTION
SUBTITLE G: WASTE DISPOSAL
CHAPTER I: POLLUTION CONTROL BOARD
SUBCHAPTER d: UNDERGROUND INJECTION CONTROL AND UNDERGROUND STORAGE TANK PROGRAMS

PART 730
UNDERGROUND INJECTION CONTROL OPERATING REQUIREMENTS

SUBPART A: GENERAL

Section
730.101 Applicability, Scope and Effective Date
730.102 Laws Authorizing Regulations
730.103 Definitions
730.104 Criteria for Exempted Aquifers
730.105 Classification of Injection Wells
730.106 Area of Review
730.107 Corrective Action
730.108 Mechanical Integrity
730.109 Criteria for Establishing Permitting Priorities
730.110 Criteria for Establishing Class I and III Wells
730.111 Plugging and Abandoning Class I and III Wells

SUBPART B: CRITERIA AND STANDARDS APPLICABLE TO CLASS I NON-HAZARDOUS WELLS

Section
730.111 Applicability
730.112 Construction Requirements
730.113 Operating, Monitoring and Reporting Requirements
730.114 Information to be Considered by Agency

SUBPART C: CRITERIA AND STANDARDS APPLICABLE TO CLASS II WELLS

Section
730.121 Adoption of Criteria and Standards Applicable to Class II Wells by the Illinois Department of Mines and Minerals

SUBPART D: CRITERIA AND STANDARDS APPLICABLE TO CLASS III WELLS

Section
730.131 Applicability
730.132 Construction Requirements
730.133 Operating, Monitoring and Reporting Requirements
730.134 Information to be Considered by the Agency

SUBPART F: CRITERIA AND STANDARDS APPLICABLE TO CLASS V INJECTION WELLS

Section
730.151 Applicability
730.152 Inventory and Assessment

SUBPART G: CRITERIA AND STANDARDS APPLICABLE TO CLASS I HAZARDOUS WELLS

Section
730.161 Applicability and Definitions
730.162 Minimum Criteria for Siting
730.163 Area of Review
730.164 Correction Action for Wells in the Area of Review
730.165 Construction Requirements

NOTICE OF ADOPTED AMENDMENTS

- b) accurate and the analyses remain representative. The owner or operator shall submit information demonstrating that the waste stream and its anticipated reaction products will not alter the permeability, thickness or other relevant characteristics of the confining or injection zones such that they would no longer meet the requirements specified in Section 730.162.

c) Compatibility of well materials.

- 1) The owner or operator shall demonstrate that the waste stream will be compatible with the well materials with which the waste is expected to come into contact, and submit to the Agency a description of the methodology used to make that determination. Compatibility for the purposes of this requirement is established if contact with injected fluids will not cause the well materials to fail to satisfy any design requirement imposed under Section 730.165(b).

- 2) The Agency shall require continuous corrosion monitoring of the construction materials used in the well for wells injecting corrosive waste, and may require such monitoring for other wastes, by:

- A) Placing coupons of the well construction materials in contact with the waste stream; or
B) Routing the waste stream through a loop constructed with the material used in the well; or
C) Using an alternative method approved by permit condition.

- 3) If a corrosion monitoring program is required:

- A) The test must use materials identical to those used in the construction of the well, and such materials must be continuously exposed to the operating pressures and temperatures (measured at the well head) and flow rates of the injection operation; and
B) The owner or operator shall monitor the materials for loss of mass, thickness, cracking, pitting and other signs of corrosion on a quarterly basis to ensure that the well components meet the minimum standards for material strength and performance set forth in Section 730.165(b).

- d) Periodic mechanical integrity testing. In fulfilling the requirements of Section 730.108, the owner or operator of a Class I hazardous waste injection well shall conduct the mechanical integrity testing as follows:

- 1) The long string casing, injection tube, and annular seal must be tested by means of an approved pressure test with a liquid or gas annually and whenever there has been a well workover;

NOTICE OF ADOPTED AMENDMENTS

- 730.166 Logging, Sampling and Testing Prior to New Well Operation
730.167 Operating Requirements
730.168 Testing and Monitoring Requirements
730.169 Reporting Requirements
730.170 Information to be Evaluated by the Director
730.171 Closure
730.172 Post-Closure Care
730.173 Financial Responsibility for Post-Closure Care

AUTHORITY: Implementing Sections 13 and 22.4 and authorized by Section 27 of the Environmental Protection Act (Ill. Rev. Stat. 1987 and 1988 Supp. 91 ch. 111-1/22, pars. 1013, 1022.4 and 1027-1/415 ILCS 5/13, 5/22.4 and 5/271).

SOURCE: Adopted in R81-32, 47 PCB 93, at 6 Ill. Reg. 12,479, effective as noted in 35 Ill. Adm. Code 700.106; amended in R82-19, 53 PCB 131 at 7 Ill. Reg. 14426 effective as noted in 35 Ill. Adm. Code 700.106; recodified at 10 Ill. Reg. 14174; amended in R89-2 at 14 Ill. Reg. 3130, effective February 20, 1990; amended in R89-11 at Ill. Reg. 15646, effective September 14, 1993.

SUBPART G: CRITERIA AND STANDARDS APPLICABLE TO CLASS I HAZARDOUS WELLS

Section 730.168 Testing and Monitoring Requirements

Testing and monitoring requirements shall at a minimum include:

a) Monitoring of the injected wastes.

- 1) The owner or operator shall develop and follow an approved written waste analysis plan that describes the procedures to be carried out to obtain a detailed chemical and physical analysis of a representative sample of the waste, including the quality assurance procedures used. At a minimum, the plan shall specify:

- A) The parameters for which the waste will be analyzed and the rationale for the selection of these parameters;
B) The test methods that will be used to test for these parameters; and
C) The sampling method that will be used to obtain a representative sample of the waste to be analyzed.

- 2) The owner or operator shall repeat the analysis of the injected wastes as described in the waste analysis plan at frequencies specified in the waste analysis plan and when process or operating changes occur that may significantly alter the characteristics of the waste stream.

- 3) The owner or operator shall conduct continuous or periodic monitoring of selected parameters as required by permit condition.

- 4) The owner or operator shall assure that the plan remains

POLLUTION CONTROL BOARD

NOTICE OF ADOPTED AMENDMENTS

- 2) The bottom-hole cement must be tested by means of an approved radioactive tracer survey annually;
- 3) An approved temperature, noise, or other approved log must be run at least once every five years to test for movement of fluid along the borehole. The Agency may require such tests whenever the well is worked over;
- 4) Running casing inspection logs.

A) Casing inspection logs must be run ~~at least once every five years~~ whenever the owner or operator conducts a workover in which the injection string is pulled, unless the Agency by permit specifies otherwise;

- i) due to well construction or other factors ~~which~~ that limit the test's reliability, or
- ii) based on the satisfactory results of a casing inspection log run within the previous five years.

B) The Agency may require by permit that the owner or operator run a casing inspection log if it determines that it has reason to believe that the integrity of the long string casing of the well may be adversely affected by naturally-occurring or man-made events; and

- 5) Any other test specified by permit condition in accordance with the procedures in Section 730.108(d) may also be used.

e) Ambient Monitoring.

- 1) Based on a site-specific assessment of the potential for fluid movement from the well or injection zone, and on the potential value of monitoring wells to detect such movement, the Agency shall require the owner or operator to develop a monitoring program. At a minimum, the Agency shall require monitoring of the pressure buildup in the injection zone annually, including at a minimum, a shut down of the well for a time sufficient to conduct a valid observation of the pressure fall-off curve.

- 2) When prescribing a monitoring system the Agency may also require:

A) Continuous monitoring for pressure changes in the first aquifer overlying the confining zone. When such a well is installed, the owner or operator shall, on a quarterly basis, sample the aquifer and analyze for constituents specified by permit condition;

B) The use of indirect, geophysical techniques to determine the position of the waste front, the water quality in a formation designated by permit condition, or to provide other site-specific data;

POLLUTION CONTROL BOARD

NOTICE OF ADOPTED AMENDMENTS

- C) Periodic monitoring of the groundwater quality in the first aquifer overlying the injection zone;
- D) Periodic monitoring of the ground water quality in the lowermost USDW;
- E) Any additional monitoring necessary to determine whether fluids are moving into or between USDWs; and
- F) The Agency may require seismicity monitoring when it has reason to believe that the injection activity may have the capacity to cause seismic disturbances.

BOARD NOTE: Derived from 40 CFR 146.68 (1992), as amended at 537 Fed. Reg. 28151-16294, July 26 October 7, 198892.

(Source: Amended at 17 Ill. Reg. 15646, effective September 14, 1993)

1) The Heading of the Part: Acquisition, Management and Disposal of Real Property

2) Code Citation: 44 Ill. Adm. Code 5000

3) Section Numbers: Emergency Action:
5000.250 New

4) Statutory Authority: Ill. Rev. Stat. 1991, ch. 127, par. 63b13.2 [20 ILCS 405/67.02]

5) Effective Date of Emergency Amendment: September 9, 1993

6) If the Emergency amendment is to expire before the end of the 150-day period, please specify the date on which it is to expire: Not applicable.

7) Date Filed in Agency's Principal Office: September 9, 1993

8) Reason for Emergency:
To enable emergency leases of real property required as a result of natural disaster, such as the Great Flood of 1993, by suspending rules which would prevent, hinder or delay necessary action.

9) A Complete Description of the Subjects and Issues Involved:
Current rules do not provide for suspension of the application of lease acquisition rules which would prevent, delay or hinder emergency real property lease transactions required to facilitate disaster response and recovery programs. The emergency rule corrects that situation.

10) Are there any Proposed Amendments pending on this Part? No.

11) Statement of Statewide Policy Objectives: The amendment has no impact on local governments.

12) Information and questions regarding the Emergency Amendment shall be directed to:
Stephen W. Seiple
720 Stratton Office Building
Springfield, IL 62706
(217)782-9669

The full text of the Emergency Amendment begin on the next page:

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF EMERGENCY AMENDMENT

TITLE 44: GOVERNMENT CONTRACTS, PROCUREMENT AND PROPERTY MANAGEMENT

SUBTITLE D: PROPERTY MANAGEMENT

CHAPTER I: DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

PART 5000

ACQUISITION, MANAGEMENT AND DISPOSAL OF REAL PROPERTY

SUBPART A: GENERAL

Section	
5000.100	Authority
5000.110	Policy
5000.120	Applicability

SUBPART B: LEASED SPACE ACQUISITION POLICY

Section	
5000.200	General Policy and Responsibility
5000.210	Requests for Space/Agency Responsibilities
5000.220	Acquisition Authority
5000.230	Acquisition Procedures
5000.240	Lease Administration
5000.250	Emergency Lease Procurement

EMERGENCY

SUBPART C: BUILDING STANDARDS

Section	
5000.300	Scope
5000.310	Area Measurement
5000.320	Space Planning Assistance
5000.330	Open Space
5000.340	Space Allowance and Standards
5000.350	Office Furnishing
5000.360	Handicapped Accessibility
5000.370	Vending Facilities/Blind Operations
5000.380	Improvements

SUBPART D: ASSIGNMENT AND MANAGEMENT OF SPACE

Section	
5000.400	Assignment and Management by DCMS
5000.410	Assignment by Agencies
5000.420	Reviews and Appeal of Space Assignment Actions
5000.430	Services Provided
5000.440	Alterations
5000.450	Local Requirements

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF EMERGENCY AMENDMENT

NOTICE OF EMERGENCY AMENDMENT

SUBPART E: UTILIZATION OF SPACE
(STATE OWNED AND LEASED PROPERTIES)

Space Inspections and Surveys
Responsibility of Agencies
Release of Space Not Fully Utilized
Notice of DCMS of Relinquishment or Termination of Space

Section
5000.500
5000.510
5000.520
5000.530

SUBPART F: EXCESS REAL PROPERTY

Excess Real Property Defined
Reports of Excess Real Property
Utilization of Excess Real Property
Charges for Use of Excess Property
Temporary Occupancy
Disputes
Non-State Use

Section
5000.600
5000.610
5000.620
5000.630
5000.640
5000.650
5000.660

SUBPART G: SURPLUS REAL PROPERTY

Surplus Real Property Defined
Declaration of Surplus
Reporting Surplus Real Property
Notice of Availability to State Agencies
State Agency Requests for Surplus Real Property
Transfer Decisions
Transfer Procedures
Transfer to Department of Central Management Services
Subsequent Disposal
Sale of Surplus
Notice of Sale to Local Governments
Local Government Offer to Purchase
Public Sale
Public Sale Procedures
Non-State Interim Use

Section
5000.700
5000.710
5000.720
5000.730
5000.740
5000.750
5000.760
5000.770
5000.780
5000.790
5000.800
5000.810
5000.820
5000.830
5000.840

SUBPART H: USE OF OFFICE BUILDINGS

Applicability
Definitions
Business Hours and Public Access
Prohibited Activities
Demonstrations
Exhibits and Special Events
Distribution of Leaflets and Solicitations of Funds, Voter
Registration and Signatures

Section
5000.900
5000.910
5000.920
5000.930
5000.940
5000.950
5000.960

5000.970 Severability
APPENDIX A Space Standards
APPENDIX B Rental Fees

AUTHORITY: Implementing Section 7.1 of the State Property Control Act (Ill. Rev. Stat. 1991, ch. 127, par. 133b10.1) [30 ILCS 605/7.1], implementing and authorized by Sections 51, 67.02, 67.06, 67.07, 67.22 and 67.24 of the Civil Administrative Code of Illinois (Ill. Rev. Stat. 1991, ch. 127, pars. 51, 63b13.2, 63b13.6, 63b13.7, 63b13.22 and 63b13.24) [20 ILCS 5/51, 20 ILCS 405/67.02, 20 ILCS 405/67.06, 20 ILCS 405/67.07, 20 ILCS 405/67.22 and 20 ILCS 405/67.24] and authorized by Section 6 of the State Property Control Act (Ill. Rev. Stat. 1991, ch. 127, par. 133b9) [30 ILCS 605/61]; implementing and authorized by Section 3.1 of the Public Officer Prohibited Activities Act (Ill. Rev. Stat. 1991, ch. 102, par. 3.1 [50 ILCS 105/3.1]).

SOURCE: Adopted at 6 Ill. Reg. 12984, effective October 13, 1982; emergency amendment at 7 Ill. Reg. 3743, effective March 18, 1983, for a maximum of 150 days; amended at 7 Ill. Reg. 7825, effective June 22, 1983; emergency amendment at 8 Ill. Reg. 13444, effective July 17, 1984 for a maximum of 150 days; codified at 8 Ill. Reg. 19345; amended at 10 Ill. Reg. 636, effective December 31, 1985; amended at 17 Ill. Reg. 1006, effective January 19, 1993; emergency amendment at 17 Ill. Reg. 2361, effective February 5, 1993, for a maximum of 150 days; amended at 17 Ill. Reg. 10573, effective July 1, 1993; emergency amendment at 17 Ill. Reg. 15653, effective September 9, 1993, for a maximum of 150 days.

Section 5000.250 Emergency Lease Procurement
EMERGENCY

a) The Director may, upon good cause shown, suspend the application of any rules governing the acquisition of leased real property in the event of a natural disaster, including but not limited to fire, flood or other casualty, or agency action required by the order of a court of competent jurisdiction, where strict compliance with the applicable rule would result in consequences adverse to the best interests of the State.

b) All requests for emergency suspension of applicable rules in a proposed lease transaction shall be accompanied by a written memorandum to the Director from the responsible leasing official setting forth the following:

- 1) A detailed description of the natural disaster or the requirements of a court order precipitating the request.
- 2) A detailed description of the proposed leasing transaction.

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF EMERGENCY AMENDMENT

- 3) A narrowly drawn specification of the rule or rules sought to be suspended in application to the proposed leasing transaction.
- 4) A specific indication that no reasonable alternatives exist to the suspension of the rule or rules which would be in the best interests of the State.
- c) Prior to submission to the Director the written memorandum of request shall be reviewed and approved by DCMS legal counsel.
- d) The Director, after review of the memorandum of request, may grant the suspension sought, in whole or in part, with respect to the proposed lease transaction, provided however, that such suspension shall apply only to leases with terms not to exceed 2 years in duration.

(Source: Emergency amendment at 17 Ill. Reg. 15653, effective September 9, 1993, for a maximum of 150 days)

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

NOTICE OF EMERGENCY AMENDMENTS

- 1) The Heading of the Part: Reports of Child Abuse and Neglect
- 2) Code Citation: 89 Ill. Adm. Code 300
- 3) Section Numbers: Emergency Action:
300.20 Amendment
- 4) Statutory Authority: Section 3 of the Abused and Neglected Child Reporting Act (Ill. Rev. Stat. 1991, ch. 23, par. 2053) [325 ILCS 5/3] as amended by Public Act 88-85 effective July 14, 1993.
- 5) Effective Date of Amendments: September 10, 1993
- 6) If these emergency amendments are to expire before the end of the 150 day period, please specify the date on which it is to expire: Not applicable
- 7) Date Filed in Agency's Principal Office: September 10, 1993
- 8) Reason for Emergency: The Public Act has an immediate effective date and the content of the Act makes a substantial change in what constitutes child neglect in Illinois.
- 9) A Complete Description of the Subjects and Issues Involved: The Department will no longer consider a child neglected for the sole reason that the child's parent or other person responsible for the child's welfare left the child in the care of an adult relative for any period of time as a plan of care.
- 10) Are there any proposed amendments to this Part pending: No
- 11) Statement of Statewide Policy Objectives: This amendment does not create or expand a state mandate as defined in Section 3(b) of the State Mandates Act (Ill. Rev. Stat. 1991, ch. 85, par. 2203) [30 ILCS 805/3].
- 12) Information and questions regarding these amendments shall be directed to:

Name: Jacqueline Nottingham, Chief

Address: Office of Rules and Procedures
Department of Children and Family Services
406 East Monroe
Springfield, Illinois 62701 - 1498

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

NOTICE OF EMERGENCY AMENDMENTS

Telephone: 217/524 - 1983
 TDD: 217/524 - 3715

The full text of the emergency amendments begins on the next page:

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

NOTICE OF EMERGENCY AMENDMENTS

TITLE 89: SOCIAL SERVICES
 CHAPTER III: DEPARTMENT OF CHILDREN AND FAMILY SERVICES
 SUBCHAPTER a: SERVICE DELIVERY

PART 300
 REPORTS OF CHILD ABUSE AND NEGLECT

Section
 300.10
 300.20
 EMERGENCY

Purpose
 Definitions

Reporting Child Abuse or Neglect to the Department
 Content of Child Abuse or Neglect Reports
 Transmittal of Child Abuse or Neglect Reports
 Special Types of Reports (Recodified)
 Referrals to the Local Law Enforcement Agency and
 State's Attorney

Delegation of the Investigation
 Time Frames for the Investigation
 Initial Investigation

The Formal Investigative Process

Taking Children into Temporary Protective Custody

Notices Whether Child Abuse or Neglect Occurred

Transmittal of Information to the Illinois Department of
 Professional Regulation and to School Superintendents

Referral for Other Services

Special Types of Reports

Acknowledgement of Mandated Reporter Status

Child Abuse and Neglect Allegations

AUTHORITY: Implementing and authorized by the Abused and Neglected Child Reporting Act (Ill. Rev. Stat. 1991, ch. 23, pars. 2051 et seq.) [325 ILCS 5/1] and Section 3 of "AN ACT in relation to the performance of medical, dental or surgical procedures on and counseling of minors" (Ill. Rev. Stat. 1991, ch. 111, par. 4503) [410 ILCS 210/3].

SOURCE: Adopted and codified as 89 Ill. Adm. Code 302 at 5 Ill. Reg. 13188, effective November 30, 1981; amended at 6 Ill. Reg. 15529, effective January 1, 1983; recodified at 8 Ill. Reg. 992; peremptory amendment at 8 Ill. Reg. 5373, effective April 12, 1984; amended at 8 Ill. Reg. 12143, effective July 9, 1984; amended at 9 Ill. Reg. 2467, effective March 1, 1985; amended at

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

NOTICE OF EMERGENCY AMENDMENTS

inflicts excessive corporal punishment. (Ill. Rev. Stat. 1989, ch. 23, par. 2053) [325 ILCS 5/3]

"Caretaker" means the child's parent(s), guardian or custodian with whom the child lives and who has primary responsibility for the care and supervision of the child.

"Child" means any person under the age of 18 years, unless legally emancipated by reason of marriage or entry into a branch of the United States armed services.

"Child care facility" means any person, group of persons, agency, association, or organization which arranges for or cares for children unrelated to the operator of the facility, apart from the parents. Child care facilities may be established for profit or not-for-profit. "Child care facility" is further defined in Section 2.05 of the Child Care Act and includes foster family homes and day care homes.

"Child Protective Service Unit" (CPS) means certain specialized State employees of the Department assigned by the Director or his designee to perform the duties and responsibilities as provided under this Part. They are also known as investigative staff. (Ill. Rev. Stat. 1989, ch. 23, par. 2053) [325 ILCS 5/3]

"Children for whom the Department is legally responsible" means children for whom the Department has temporary protective custody, custody or guardianship via court order, or children whose parent(s) has signed an adoptive surrender or voluntary placement agreement with the Department.

"Collateral contact" means obtaining information concerning a child, parent, or other person responsible for the child from a person who has knowledge of the family situation but was not directly involved in referring the child or family to the Department for services.

"Credible evidence of child abuse or neglect" means that the available facts when viewed in light of surrounding circumstances would cause a reasonable person to believe that a child was abused or neglected.

"Delegation of an investigation" means the decision whether a report of child abuse or neglect was "indicated" or "unfounded" has been deferred to another authority. The Department maintains

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

NOTICE OF EMERGENCY AMENDMENTS

9 Ill. Reg. 9104, effective June 14, 1985; amended at 9 Ill. Reg. 15820, effective November 1, 1985; amended at 10 Ill. Reg. 5915, effective April 15, 1986; amended at 11 Ill. Reg. 1390, effective January 13, 1987; amended at 11 Ill. Reg. 1151, effective January 14, 1987; amended at 11 Ill. Reg. 1829, effective January 15, 1987; recodified from 89 Ill. Adm. Code 302.20, 302.100, 302.110, 302.120, 302.130, 302.140, 302.150, 302.160, 302.170, 302.180, 302.190, and Appendix A at 11 Ill. Reg. 3492; emergency amendments at 11 Ill. Reg. 4058, effective February 20, 1987; for a maximum of 150 days; amended at 11 Ill. Reg. 12619, effective July 20, 1987; recodified at 11 Ill. Reg. 13405; amended at 13 Ill. Reg. 2419, effective March 1, 1989; emergency amendment at 14 Ill. Reg. 11356, effective July 1, 1990, for a maximum of 150 days; amended at 14 Ill. Reg. 17558, effective October 15, 1990; amended at 14 Ill. Reg. 19827, effective November 28, 1990; emergency amendment at 15 Ill. Reg. 14285, effective September 25, 1991; amended at 15 Ill. Reg. 17986, effective December 1, 1991; emergency amendment at 17 Ill. Reg. 15658, effective Sept. 10, 1993 for a maximum of 150 days.

Section 300.20 Definitions
EMERGENCY

"Abused Child" means a child whose parent or immediate family member, or any person responsible for the child's welfare, or any individual residing in the same home as the child, or a paramour of the child's parent:

- inflicts, causes to be inflicted, or allows to be inflicted upon such child physical or mental injury, by other than accidental means, which causes death, disfigurement, impairment of physical or emotional health, or loss or impairment of any bodily function;*
- creates a substantial risk of physical or mental injury to such child by other than accidental means which would be likely to cause death, disfigurement, impairment of physical or emotional health, or loss of or impairment of any bodily function;*
- commits or allows to be committed any sex offense against such child, as such sex offenses are defined in the Criminal Code of 1961, as amended, and extending those definitions of sex offenses to include children under 18 years of age;*
- commits or allows to be committed an act or acts of torture upon such child; or*

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

NOTICE OF EMERGENCY AMENDMENTS

responsibility for entering information about the report in the State Central Register and for notifying the subjects of the report and mandated reporters of the results of the investigation.

"Department," as used in this Part, means the Department of Children and Family Services.

"Determination" means a final Department decision about whether there is credible evidence that child abuse or neglect occurred. A determination must be either "indicated" or "unfounded."

"Disfigurement" means a serious or protracted blemish, scar, or deformity that spoils a person's appearance or limits bodily functions.

"Formal investigation" means those activities conducted by Department investigative staff necessary to make a determination as to whether a report of suspected child abuse or neglect is indicated or unfounded. Such activities shall include: *an evaluation of the environment of the child named in the report and any other children in the same environment; a determination of the risk to such children if they continue to remain in the existing environments, as well as a determination of the nature, extent and cause of any condition enumerated in such report, the name, age and condition of other children in the environment; and an evaluation as to whether there would be an immediate and urgent necessity to remove the child from the environment if appropriate family preservation services were provided. After seeing to the safety of the child or children, the Department shall forthwith notify the subjects of the report in writing, of the existence of the report and their rights existing under this Act in regard to amendment or expungement.* (Ill. Rev. Stat. 1989, ch. 23, par. 2053) [325 ILCS 5/3]

"Indicated Report" means any report of child abuse or neglect made to the Department for which it is determined, after an investigation, that credible evidence of the alleged abuse or neglect exists.

"Initial Investigation" means those activities conducted by Department investigative staff to determine whether a report of suspected child abuse or neglect is a good faith indication of abuse or neglect and, therefore, requires a formal investigation. Good faith in this context means that the report was made with the honest intention to identify actual child abuse or neglect.

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

NOTICE OF EMERGENCY AMENDMENTS

"Initial Oral Report" means a report alleging child abuse or neglect for which the State Central Register has no prior records on the family.

"Involved Subject" means a child who is the alleged victim of child abuse or neglect or a person who is the alleged perpetrator of the child abuse or neglect.

"Local law enforcement agency" means the police of a city, town, village or other incorporated area or the sheriff of an unincorporated area or any sworn officer of the Illinois Department of State Police.

"Mandated reporters" means those individuals required to report suspected child abuse or neglect to the Department. A list of these persons and their associated responsibilities is provided in Section 300.30 of this Part.

"Neglected child" means any child who is not receiving the proper or necessary whose parent or other person responsible for the child's welfare withholds or denies nourishment or medically indicated treatment including food or care not provided denied solely on the basis of present or anticipated mental or physical impairment as determined by a physician acting alone or in consultation with other physicians or otherwise is does not receiving provide the proper or necessary support or medical or other remedial care recognized under State law as necessary for a child's well-being (including where there is harm or substantial risk of harm to the child's health or welfare), or other care necessary for a child's well-being, including adequate food, clothing and shelter; or who is abandoned by his or her parents or other person responsible for the child's welfare without a proper plan of care; or who is a newborn infant whose blood and urine contains any amount of controlled substance as defined in subsection (f) of Section 102 of the Illinois Controlled Substances Act or a metabolite thereof, with the exception of a controlled substance or metabolite thereof whose presence in the newborn infant is the result of medical treatment administered to the mother or newborn infant. A child shall not be considered neglected for the sole reason that the child's parent or other person responsible for his or her welfare has left the child in the care of an adult relative for any period of time as a plan of care. A child shall not be considered neglected or abused for the sole reason that such child's parent or other person responsible for his or her welfare depends upon

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

NOTICE OF EMERGENCY AMENDMENTS

custody cannot exceed 48 hours excluding Saturdays, Sundays and holidays.

"Undetermined report" means any report of child abuse or neglect made to the Department in which it was not possible to complete an investigation within 60 days on the basis of information provided to the Department.

"Unfounded report" means any report of child abuse or neglect for which it is determined, after an investigation, that no credible evidence of the alleged abuse or neglect exists.

(Source: Emergency amendments at 17 Ill. Reg. 15658, effective Sept. 10, 1993 for a maximum of 150 days.)

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

NOTICE OF EMERGENCY AMENDMENTS

spiritual means through prayer alone for the treatment or cure of disease or remedial care under Section 4 of the Abused and Neglected Child Reporting Act (Ill. Rev. Stat. 1989, ch. 23, par. 2053) [325 ILCS 5/3]. Where the circumstances indicate harm or substantial risk of harm to the child's health or welfare and necessary medical care is not being provided to treat or prevent that harm or risk of harm because such parent or other person responsible for the child's welfare depends upon spiritual means alone for treatment or cure, such child is subject to the requirements of this Act for the reporting of, investigation of, and provision of protective services with respect to such child and his health needs, and in such cases spiritual means through prayer alone for the treatment or cure of disease or for remedial care will not be recognized as a substitute for such necessary medical care, if the Department or, as necessary, a juvenile court determines that medical care is necessary. A child shall not be considered neglected or abused solely because the child is not attending school in accordance with the requirements of Article 26 of The School Code, as amended.

"Perpetrator" means a person who, as a result of investigation, has been determined by the Department to have caused child abuse or neglect.

"Person responsible for the child's welfare" means the child's parent, guardian, foster parent, an operator, supervisor, or employee of a public or private residential agency or institution or public or private profit or not-for-profit child care facility; or any other person responsible for the child's welfare at the time of the alleged abuse or neglect, or any person who came to know the child through an official capacity or position of trust, including but not limited to health care professionals, educational personnel, recreational supervisors, and volunteers or support personnel in any setting where children may be subject to abuse or neglect. (Ill. Rev. Stat. 1989, ch. 23, par. 2053) [325 ILCS 5/3]

"Subject of a report" means any child reported to the child abuse/neglect State Central Register, and his or her parent, personal guardian or other person responsible for the child's welfare who is named in the report.

"Temporary protective custody" means custody within a hospital or other medical facility or a place previously designated by the Department, subject to review by the Court. Temporary protective

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

- 1) Heading of the Part: Safe Operation of Nuclear Facility Boilers and Pressure Vessels

- 2) Code Citation: 32 Ill. Adm. Code 505

3) Section Number:

Emergency Action:

New Section
505.10
New Section
505.20
New Section
505.30
New Section
505.40
New Section
505.50
New Section
505.60
New Section
505.70
New Section
505.80
New Section
505.82
New Section
505.84
New Section
505.86
New Section
505.90
New Section
505.100
New Section
505.110
New Section
505.120
New Section
505.130
New Section
505.140
New Section
505.150
New Section
505.160
New Section
505.170
New Section
505.180
New Section
505.190
New Section
505.1000
New Section
505.1100
New Section
505.1200
New Section
505.1300
New Section
505.1400
New Section
505.1500
New Section
505.1600
New Section
505.1700
New Section
505.1800
New Section
505.1900
New Section
505.2000
New Section
505.2100
New Section
505.2200
New Section
505.2300
New Section
505.2400
New Section
505.2500
New Section
505.2600
New Section
505.2700

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

505.2800 New Section
505.2900 New Section

- 4) Statutory Authority: Implementing and authorized by Section 8(a)(8) of the Illinois Nuclear Safety Preparedness Act (Ill. Rev. Stat. 1991, ch. 111 ½ par. 4308) [420 ILCS 5], Sections 2a and 2b of the Boiler and Pressure Vessel Safety Act (Ill. Rev. Stat. 1991, ch. 111 ½, par. 3202a) [430 ILCS 75], and by Section 71(C) of the Civil Administrative Code of Illinois (Ill. Rev. Stat. 1991, ch. 127, par. 63817(C)) [20 ILCS 2005/71].

- 5) Effective Date of Rules: September 10, 1993

- 6) If this emergency rule is to expire before the end of the 150-day period, please specify the date on which it is to expire: Not Applicable

- 7) Date Filed in Agency's Principal Office: September 10, 1993

- 8) Reason for Emergency: This emergency rulemaking is necessary to implement Section 8(a)(8) of the Illinois Nuclear Safety Preparedness Act and Sections 2a and 2b of the Boiler and Pressure Vessel Safety Act. The Administrative Procedures Act defines "Emergency" as "the existence of any situation which any agency finds reasonably constitutes a threat to the public interest, safety or welfare." (Ill. Rev. Stat. 1991, ch. 127, par. 1005.02) [5 ILCS 100/5-45]

This rulemaking is necessary to allow expeditious repairs to be made to nuclear steam-generating facilities in the state. IDNS has statutory authority to issue rules for Boiler and Pressure Vessel Safety at Illinois nuclear plants. To that end, the Department has filed a set of proposed regulations to assure that the public is protected from hazards associated with said boilers and pressure vessels. The regulated community was given an opportunity to comment on them and the Department worked with them to resolve all of their technical comments.

It is essential that owners and operators of nuclear facilities be able to operate boilers and pressure vessels required for the production of electric power. It is also essential that owners and operators of nuclear facilities be able to perform necessary repairs to boilers and pressure vessels as needed to assure their safe operation.

The Office of the State Fire Marshal and IDNS are in the process of promulgating regulations to affect the transition of responsibilities under the Boiler and Pressure Vessel Safety Act. IDNS has a set of

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

proposed regulations it is filing, concurrent with and identical to these, to promulgate as permanent rules. In the absence of these emergency rules, no state regulations would exist to govern the repair and inspection of boiler and pressure vessels, and thus, it would be difficult to assure that boilers and pressure vessels in Illinois nuclear plants are safe. As the transition proceeds, an emergency rulemaking is needed to fill the void created in state regulations concerning boiler and pressure vessel repairs and inspections. Therefore, to provide a reasonable time period for the Department to proceed with the adoption of permanent rules, it is necessary to proceed with emergency rulemaking so that normal repair and alteration activities may proceed. It is more expeditious for IDNS to initiate an emergency rulemaking at this stage of the transition than for the OSFM to do so.

- 9) A Complete Description of the Subjects and Issues Involved: The Department is proposing this rule to implement its statutory authority relating to boiler and pressure vessel safety, by establishing a program to require the use of nationally recognized standards for the safe and proper design, construction, installation, repair, alteration, inservice examination and testing, and use of boilers and pressure vessels at nuclear facilities in the state. The rule provides for the registration of boilers and pressure vessels. It also provides for the issuance of inspection certificates for nuclear power systems and boilers and pressure vessels outside the regulatory purview of the Nuclear Regulatory Commission, to document that such systems, boilers and pressure vessels comply with these rules.

- 10) Are there any other proposed amendments to this Part pending? Yes. Elsewhere in today's Illinois Register, the Department has proposed, for public comment, a general rulemaking that covers the topics included in the Emergency Rule.

- 11) Statement of Statewide Policy Objectives: The requirements imposed by the emergency rulemaking are not expected to require local governments to establish, expand, or modify their activities in such a way as to necessitate additional expenditures from local revenues.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

- 12) Information and questions regarding this emergency rule shall be directed to:

Lyle Black
Staff Attorney
Department of Nuclear Safety
1035 Outer Park Drive
Springfield, Illinois 62704
(217) 524-0770 (voice)
(217) 782-6133 (TDD)

The full text of the emergency rules begins on the next page:

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

TITLE 32: ENERGY
CHAPTER II: DEPARTMENT OF NUCLEAR SAFETY
SUBCHAPTER C: NUCLEAR FACILITY SAFETYPART 505
SAFE OPERATION OF NUCLEAR FACILITY BOILERS AND PRESSURE VESSELS

SUBPART A: GENERAL

Section 505.10 EMERGENCY	Scope
505.20 EMERGENCY	Policy
505.30 EMERGENCY	Definitions
505.40 EMERGENCY	Standards Incorporated by Reference
505.50 EMERGENCY	Exemptions
505.60 EMERGENCY	Access to Facilities and Documents
505.70 EMERGENCY	Notification of Failures
505.80 EMERGENCY	Administrative Review and Hearings - Inspection Certificates
505.82 EMERGENCY	Administrative Review and Hearings - Authorized Inspection Agency
505.84 EMERGENCY	Administrative Review and Hearings - Special Permits
505.86 EMERGENCY	Actions Pending Before the United States Nuclear Regulatory Commission
505.90 EMERGENCY	Address and Telephone Number for Notifications and Inquiries
505.100 EMERGENCY	Standards for Design, Construction, Operation and Inspection (general)
505.110 EMERGENCY	Registration Requirements (general)
505.120 EMERGENCY	Inspection Certificates (general)
505.130 EMERGENCY	Operation Requirements (general)
505.140 EMERGENCY	Inspection Requirements (general)

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

Section 505.150 EMERGENCY	Repairs and Alterations (general)
505.160 EMERGENCY	Code Case Applications (general)
505.170 EMERGENCY	Issuance of Permits and Registration of Non-ASME Code Boilers and Pressure Vessels (State Specials) (general)
505.180 EMERGENCY	Authorized Inspectors (general)
505.190 EMERGENCY	Authorized Inspection Agencies (general)

SUBPART B: ISI BOILERS AND PRESSURE VESSELS

Section 505.1000 EMERGENCY	Standards for Design, Construction, Operation and Inspection
505.1100 EMERGENCY	Registration Requirements
505.1200 EMERGENCY	Inspection Certificates
505.1300 EMERGENCY	Operation Requirements
505.1400 EMERGENCY	Inspection Requirements
505.1500 EMERGENCY	Repairs
505.1600 EMERGENCY	Code Case Applications
505.1700 EMERGENCY	Issuance of Permits and Registration of Non-ASME Code Boilers and Pressure Vessels (State Specials)
505.1800 EMERGENCY	Authorized Inspectors
505.1900 EMERGENCY	Authorized Inspection Agencies

SUBPART C: NON-ISI BOILERS AND PRESSURE VESSELS

Section 505.2000 EMERGENCY	Standards for Design, Construction, Operation and Inspection
505.2100 EMERGENCY	Registration Requirements
505.2200 EMERGENCY	Inspection Certificates

DEPARTMENT OF NUCLEAR SAFETY

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

NOTICE OF EMERGENCY RULES

Section

505.2300

EMERGENCY

Operation Requirements

505.2400

EMERGENCY

Inspection Requirements

505.2500

EMERGENCY

Repairs and Alterations

505.2600

EMERGENCY

Code Case Applications

505.2700

EMERGENCY

Issuance of Permits and

Pressure Vessels (State Specials)

505.2800

EMERGENCY

Authorized Inspectors

505.2900

EMERGENCY

Authorized Inspection Agencies

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

AUTHORITY: Implementing and authorized by Section 8(a)(8) of the Illinois Nuclear Safety Preparedness Act (Ill. Rev. Stat. 1991, ch. 111½ par. 4308) [420 ILCS 5], Sections 2a and 2b of the Boiler and Pressure Vessel Safety Act (Ill. Rev. Stat. 1991, ch. 111½, par. 3202a) [430 ILCS 75], and by Section 71(C) of the Civil Administrative Code of Illinois (Ill. Rev. Stat. 1991, ch. 127, par. 63B17(C)) [20 ILCS 2005/71].

SOURCE: Emergency Rule adopted at 17 Ill. Reg. 15667, effective September 10, 1993, for a maximum of 150 days.

SUBPART A: GENERAL

Section 505.10

Scope

EMERGENCY

This Part shall apply to all boilers and pressure vessels contained within or upon or in connection with nuclear facilities within this State except as provided in Section 505.50 and elsewhere in this Part. This Part sets forth standards for the safe and proper design, construction, installation, inspection, inservice examination and testing, repair and alteration of boilers and pressure vessels which are consistent with ASME Boiler and Pressure Vessel Code and National Board Inspection Code requirements as adopted and enforced by the Nuclear Regulatory Commission (NRC). This Part provides for the registration of boilers and pressure vessels. This Part also provides for the issuance of Inspection Certificates for nuclear power systems and non-ISI boilers and pressure vessels to document that such power systems, boilers and pressure vessels comply with this Part.

Section 505.20

Policy

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

a) It is the intent of the Department of Nuclear Safety to implement this program in accordance with State law which provides that notwithstanding any other provision to the contrary, the Department of Nuclear Safety shall have sole (State) jurisdiction over all boilers and pressure vessels contained within or upon or in connection with any nuclear facility within this State. The Department of Nuclear Safety shall have the same authority and shall have and exercise the same powers and duties in relation to those boilers and pressure vessels under this (The Boiler and Pressure Vessel Safety) Act as the Board (of Boiler and Pressure Vessel Rules) or the (Office of the) State Fire Marshal have and exercise in relation to all boilers and pressure vessels in this State that are not included in this Section. (Ill. Rev. Stat. 1991, ch. 111½, par. 3202(a)) [430 ILCS 75].

b) This Part is intended to implement Sections 2a and 2b of the Boiler and Pressure Vessel Safety Act in a manner consistent with the State role provided for in the ASME Code and National Board Inspection Code. The Department intends to review Inservice Inspection Plans, reports and other documentation, as provided in this Part to determine, in coordination and cooperation with the NRC, compliance with the ASME Code, National Board Inspection Code and other applicable codes and standards referenced in Section 505.40.

c) This Part is not intended to be, in any way, inconsistent with the applicable regulations, rules and requirements of the NRC. If a requirement of this Part as applied in any situation is or would be inconsistent with the regulations, rules and requirements of the NRC, the requirements of this Part shall not be applied. In addition, if the application of any requirement of this Part could affect the safety or the operation of the nuclear facility, as determined by the NRC, the Department shall apply the requirements only with the prior concurrence of the NRC, as provided for in Section 505.86.

Section 505.30

Definitions

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

EMERGENCY

The following definitions shall apply to this Part:

"Act" or "The Act" means the Boiler and Pressure Vessel Safety Act

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

(Ill. Rev. Stat. 1991, ch. 111 1/2, par. 3201 et seq.) [430 ILCS 75].

"Alteration" means a change to a boiler or pressure vessel made necessary by, or resulting in, a change in design requirements. Non-physical changes such as rerating of a boiler or pressure vessel shall be considered an alteration. The addition of nozzles smaller than a reinforced opening size shall not be considered an alteration.

"ANSI" means the American National Standards Institute, 1430 Broadway, New York NY 10018.

"Appurtenance" means an item attached to a stamped component that has work performed on it requiring verification by an Authorized Inspector.

"ASME" means the American Society of Mechanical Engineers, 345 E. 47th Street, New York, New York 10017.

"ASME Code" means the American Society of Mechanical Engineers Boiler and Pressure Vessel Code with addenda thereof made, approved and adopted by the Council of the Society and adopted and incorporated by the Department in Section 505.40. Copies of the ASME Code may be obtained from the American Society of Mechanical Engineers.

"ASME Code Case" or "Code Case" means a document published by the ASME to clarify the intent of the ASME Code or to provide alternative requirements to those specifically indicated in the ASME Code due to special circumstances or for the use of new technology.

"Authorized Inspection Agency" means one of the following:

A department or division established by a jurisdiction which has adopted one or more Sections of the ASME Code and whose inspectors hold valid commissions issued by the National Board of Boiler and Pressure Vessel Inspectors. In Illinois, the Division of Boiler and Pressure Vessel Safety of the Office of the State Fire Marshal is the jurisdiction except for the City of Chicago; or

An inspection agency of an insurance company which is authorized (licensed) to insure and is insuring boilers and pressure vessels at nuclear facilities in this State and

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

employs inspectors who meet the requirements of Section 505.180 and Section 505.1800 or 505.2800, as applicable; or

An owner of boilers or pressure vessels who maintains a regularly established inspection department, whose organization and inspection procedures meet the requirements established by the Office of the State Fire Marshal.

"Authorized Inspector" means an individual who is employed by an Authorized Inspection Agency, holds a current Illinois Certificate of Competency issued by the Office of the State Fire Marshal pursuant to 41 Ill. Adm. Code 120.20 and meets the requirements of Section 505.180 and Section 505.1800 or 505.2800, as applicable.

"Boiler" means a closed vessel used to heat water or other liquids or to generate steam or other vapors under pressure or vacuum by the application of heat resulting from the combustion of fuels, electricity, atomic energy or waste gases.

"Power boiler" means a boiler in which steam or other vapor is generated at a pressure of more than 15 psig and includes water boilers operating at pressures exceeding 160 psig or temperatures exceeding 250°F at or near the boiler outlet.

"High pressure, high-temperature water boiler" means a water boiler operating at pressures exceeding 160 psig or temperatures exceeding 250°F at or near the boiler outlet.

"Heating boiler" means a steam heating boiler operated at pressures not exceeding 15 psig, or a hot water heating boiler operated at pressures not exceeding 160 psig or temperatures not exceeding 250°F at or near the boiler outlet.

"Hot water supply boiler" means a boiler (including fired storage water heater) furnishing hot water to be used externally to itself at pressures not exceeding 160 psig or temperatures not exceeding 250°F at or near the boiler outlet.

"Certificate inspection" means an inspection, the report of which is used by the Department as justification for issuing, withholding or revoking the Inspection Certificate.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

"Condemned boiler or pressure vessel" means any boiler or pressure vessel, including related appurtenances, that has been inspected and declared unsafe, or disqualified by legal requirements, by the Department.

"Department" means the Department of Nuclear Safety of the State of Illinois.

"Design pressure" means the pressure used in the design of a boiler or pressure vessel for the purpose of determining the minimum permissible thickness or physical characteristics (e.g., material properties) of different parts of the vessel, in accordance with design standards of the ASME Code.

"Director" means the Director of the Department of Nuclear Safety of the State of Illinois.

"External inspection" means as complete an examination as can reasonably be made of the external surfaces of a boiler or pressure vessel. This examination shall be made while it is in operation, if possible.

"Inoperative" means a boiler or pressure vessel that itself or an attached appurtenance is no longer capable of functioning within its design requirements. The inability of support equipment to operate does not cause a boiler or pressure vessel to be considered inoperative.

"Inservise inspection interval" means the period of time during which inservice examinations and system pressure tests are performed, as defined by the owner in accordance with the ASME Code Section XI.

"Inservice inspection period" means a subdivision of the inservice inspection interval, as defined by the owner in accordance with the ASME Code Section XI.

"Inservice Inspection Plan" means the documents prepared by the owner in accordance with paragraph IWA-2420 of the edition and addenda of Section XI approved by the NRC for use by the plant (10 year plan).

"Inspection" means examination and evaluation of documents and hardware by an Authorized Inspector to determine conformance of an item or an activity to the requirements of this Part.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

"Inspection Certificate" means a certification issued by the Department for the operation of a non-ISI boiler or pressure vessel or nuclear power system.

"Internal inspection" means as complete an examination as can reasonably be made of the internal surfaces of a boiler or pressure vessel while it is shut down and manhole plates, handhole plates or other inspection opening closures are removed as required by the Authorized Inspector.

"ISI boiler or pressure vessel" means any boiler or pressure vessel, including related appurtenances, that is in the owner's Inservice Inspection Plan.

"Maintenance" means routine activities conducted on an item that are performed and controlled in accordance with the owner's procedures, including minor restorative actions, that are not otherwise classified as a repair, replacement or alteration.

"Maximum Allowable Working Pressure" or "MAWP" means the maximum gauge pressure permissible (in accordance with the design requirements) at the top of a vessel in its operating position at the design temperature. This pressure is the least of those calculated for every element of the vessel using nominal thickness exclusive of allowances for corrosion and thickness required for loadings other than pressure. It is the basis for the pressure setting of the pressure relieving devices (e.g., pressure relief valves) protecting the vessel. The design pressure may be used in place of the maximum allowable working pressure in all cases for which calculations are not made to determine the value of the maximum allowable working pressure.

"National Board" means the National Board of Boiler and Pressure Vessel Inspectors, 1055 Crupper Avenue, Columbus, Ohio 43229.

"National Board Inspection Code" means the National Board Inspection Code: A Manual for Boiler and Pressure Vessel Inspectors, published by the National Board and adopted and incorporated by the Department in Section 505.40. Copies may be obtained from the National Board.

"NFPA" means the National Fire Protection Association, 1 Batterymarch Park, Quincy MA 02269.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

"Non-ISI boiler or pressure vessel" means any boiler or pressure vessel, including related appurtenances, that is not in the owner's Inservice Inspection Plan.

"Non-standard boiler or pressure vessel" means any boiler or pressure vessel, including related appurtenances, that does not bear the ASME Code Symbol Stamp.

"NRC" means the United States Nuclear Regulatory Commission or any agency which succeeds to its function in the licensing of nuclear power reactors or facilities, or facilities for spent nuclear fuel.

"Nuclear facility" means a nuclear power station. There may be one or more nuclear power systems at a nuclear power station.

"Nuclear power system" means all ISI boilers and pressure vessels in a unit, including their appurtenances, at a nuclear facility that are inspected in accordance with an Inservice Inspection Plan. Such components are generally associated with systems that serve the purpose of producing and controlling the output of thermal energy from nuclear fuel and associated systems essential to the function and overall safety of the nuclear power system.

"Owner" means any organization, person, firm or corporation legally responsible for the safe operation of any boiler or pressure vessel at a nuclear facility within the State.

"PSIG" means pounds per square inch gauge and is a measure of pressure.

"Pressure relief valve" means a safety valve, relief valve or safety relief valve.

"Pressure vessel" means an enclosed vessel in which pressure is obtained from an external source, or by applying heat from an indirect source or from a direct source other than boilers as defined above. Reactor containments are not considered pressure vessels.

"Quality Assurance Program" means

a controlled system of planned and systematic actions required to provide adequate confidence that the items designed and constructed are in accordance with the rules of the ASME Code Section III; or

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

all the planned and systematic actions necessary to provide adequate confidence that a structure, system or component will perform satisfactorily in service in accordance with Appendix B of 10 CFR 50, as applicable.

"Reinstalled boiler or pressure vessel" means any boiler or pressure vessel, including related appurtenances, removed from its original setting and reinstalled at the same location or at a new location within the State of Illinois without change of ownership.

"Relief valve" means an automatic pressure relieving device actuated by the static pressure upstream of the valve which opens further with the increase in pressure over the opening pressure. It is used primarily for liquid service.

"Repair" means the process of restoring a nonconforming item by welding or brazing such that existing design requirements are met.

"Report of Inspection" means a report prepared by an Authorized Inspector which documents that a non-ISI boiler or pressure vessel meets the requirements of this Part for installation and periodic inspection.

"Reportable event" means any accident which either causes a boiler or pressure vessel to become inoperative due to damage from an explosion, catastrophic event, or failure due to material condition, of either itself or an attached appurtenance, or results in death or bodily injury to a person.

"Rerating" means the increase of the MAWP or temperature of a boiler or pressure vessel regardless of whether or not physical work is performed on the boiler or pressure vessel. Rerating shall be considered an alteration.

"Safety relief valve" means an automatic pressure actuated relieving device suitable for use as a safety or relief valve, depending on application.

"Safety valve" means an automatic pressure relieving device actuated by the static pressure upstream of the valve and characterized by full opening pop action. It is primarily used for gas or vapor service.

"State Special" means a boiler or pressure vessel, including related appurtenances, of special construction that may not be constructed in accordance with the ASME Code. See Sections

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

505.170, 505.1700 and 505.2700 for the procedures for granting a State Special.

"Special Inspector" means an Inspector holding an Illinois Certificate of Competency and a Commission issued by the Office of the State Fire Marshal (OSFM) and who is regularly employed by an insurance company which is authorized (licensed) to insure and is insuring boilers and pressure vessels at nuclear facilities in this State.

"Technical specifications" means part of the Updated or Final Safety Analysis Report and Operating License issued by the NRC that designates safety limits, limiting safety system settings, limiting conditions for operation and surveillance requirements for the safe operation of the nuclear facility.

"Underwriters Laboratories" (U.L.) means a non-profit independent organization testing for public safety. It maintains and operates laboratories for the examination and testing of devices, systems and materials to determine their relationship to life, fire and casualty hazards.

"Updated or Final Safety Analysis Report" means a report required by the NRC in accordance with 10 CFR 50.34.

"Welding" means a group of processes wherein coalescence is produced by heating with an arc or arcs, with or without the application of pressure and with or without the use of filler metal.

Section 505.40 Standards Incorporated by Reference EMERGENCY

The Department hereby adopts and incorporates by reference the following codes and standards.

- a) In accordance with the authority granted under Section 2a of the Act, the Department adopts the Boiler and Pressure Vessel Code of the American Society of Mechanical Engineers with addenda thereto made. Those Sections of the ASME Code listed below are incorporated into and constitute a part of the whole rules and regulations of the Department.

- 1) ASME Boiler and Pressure Vessel Code, 1992 Edition including earlier editions and addenda, for the following:

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

- A) Section I, Rules for Construction of Power Boilers;
- B) Section II, Material Specifications;
 - Part A - Ferrous
 - Part B - Nonferrous
 - Part C - Welding Rods, Electrodes and Filler Metals
 - Part D - Properties
- C) Section III, Rules for Construction of Nuclear Power Plant Components, Division 2 - Concrete Reactor Vessels and Containments;
- D) Section IV, Rules for Construction of Heating Boilers;
- E) Section V, Nondestructive Examination;
- F) Section VI, Recommended Rules for Care and Operation of Heating Boilers;
- G) Section VII, Recommended Guidelines for Care of Power Boilers;
- H) Section VIII, Rules for Construction of Pressure Vessels;
 - Division 1 - Including Appendix M
 - Division 2 - Alternative Rules
- I) Section IX, Welding and Brazing Qualifications; and
- J) Section X, Fiberglass-Reinforced Plastic Pressure Vessels.

AGENCY NOTE: Documents incorporated by subsection (1) above include earlier editions and addenda. The Department recognizes that earlier editions and addenda are in use at nuclear facilities and periodically are updated to later editions and addenda.

- 2) ASME Boiler and Pressure Vessel Code, editions and addenda referenced in Title 10 of the Code of Federal Regulations (CFR) Part 50, Section 50.55a (10 CFR 50.55a), Paragraph (b) revised as of January 1, 1991, including all limitations and modifications contained therein, for the following:

- A) Section III, Rules for Construction of Nuclear Power

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

Plant Components, Division 1 - Nuclear Power Plant Components; and

- B) Section XI, Rules for Inservice Inspection of Nuclear Power Plant Components, Division 1 - Rules for Inspection and Testing of Light-Water Cooled Plants.

AGENCY NOTE: Documents incorporated by subsection (2) above include earlier editions and addenda. The Department recognizes that earlier editions and addenda are in use at nuclear facilities and periodically are updated to later editions and addenda. The Department will review programs at specific plants on the basis of the edition and addenda of Sections III and XI approved by the NRC for the specific plant.

- b) The Department adopts The National Board Inspection Code, 1992 edition published by the National Board, except that in all cases "should" shall be read as "shall", "jurisdiction" shall be read as "Department", and reference to Chapter III within Chapter II shall be read as reference to Sections 505.150, 505.1500 or 505.2500.
- c) The Department adopts the following nationally recognized standards and their addenda:
- 1) ASME CSD-1, 1988, Controls and Safety Devices for Automatically Fired Boilers, Part CF only, for boilers installed or reinstalled after January 1, 1991 and Section CW-520;
 - 2) NFPA 8501-92, Single Burner Boilers - Furnaces;
 - 3) NFPA 85-C, 1991, Multiple Burner Boilers - Furnaces; and
 - 4) NFPA 85-F, 1988, Pulverized Fuel Systems.
- d) The Department adopts ANSI/ASME N626, Qualification and Duties of Authorized Nuclear Inspection Agencies and Personnel, 1990 Edition with addenda through N626a-1991, including earlier editions and addenda.
- e) For documents included in subsections (a) through (d) above, the Department is incorporating only those editions and addenda indicated. The Department is not incorporating any subsequent edition or addendum to these documents. Earlier editions and addenda are incorporated into this Part as indicated in subsections (a) through (d) above. All documents are available

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

for public review at the Department offices, 1035 Outer Park Drive, Springfield, Illinois.

Section 505.50 Exemptions
EMERGENCY

The following exemptions to requirements in this Part shall be permitted except as defined below or as otherwise provided in this Part. The exemptions provided below in subsections (a)(1), (2) and (3) shall not be permitted for ISI boilers and pressure vessels.

- a) Except as provided in Section 505.70, the following boilers and pressure vessels shall be exempt from the requirements of this Part:
 - 1) Pressure vessels having a width, height or cross-sectional diagonal not exceeding 6 inches with no limitation on length of vessel or pressure;
 - 2) Pressure vessels for containing water under pressure, including those containing air, the compression of which serves only as a cushion, when none of the following limitations are exceeded:
 - A) A design pressure of 300 psig; or
 - B) A design temperature of 210°F.
 - 3) Boilers and pressure vessels which have either a Limiting Condition for Operation (LCO) or a surveillance requirement in the plant's technical specifications;
 - 4) Pressure vessels considered or part of water conditioning equipment for removing minerals, chemicals or particulate from water by means other than application of heat, including water softeners, water filters, dealkalizers and demineralizers when all of the following criteria are met:
 - A) The temperature of the water in such vessels shall not exceed 100°F;
 - B) No heat may be applied to the water prior to being placed into such vessels nor while in such vessels and no heat may be applied to such vessels themselves either directly or indirectly;

DEPARTMENT OF NUCLEAR SAFETY
NOTICE OF EMERGENCY RULES

- C) The pressure of the water in such vessels shall not exceed 150 psig; and
- D) Such vessels may not contain any material of a hazardous, toxic, radioactive or explosive nature.
- 5) Hot water supply boilers which are directly fired with oil, gas or electricity, when none of the following limitations are exceeded:
 - A) Heat input of 200,000 BTU/hr.; or
 - B) Water temperature of 200°F; or
 - C) Nominal water containing capacity of 120 gallons.
- 6) Pressure vessels which are integral parts or components of rotating or reciprocating mechanical devices such as pumps, compressors, turbines, generators, engines and hydraulic or pneumatic cylinders where the primary design considerations or stresses are derived from the functional requirements of the device;
- 7) Vessels operated at a pressure not exceeding 15 psi with no limitation on size;
- 8) Coil type hot water boilers where the water can flash into steam when released directly to the atmosphere through a manually operated nozzle provided the following conditions are met:
 - A) There is no drum, headers or other steam spaces;
 - B) No steam is generated within the coil;
 - C) Outside diameter of tubing does not exceed 1 inch;
 - D) Pipe size does not exceed 3/4 inch;
 - E) Water capacity of the unit does not exceed 6 U. S. gallons; and
 - F) Water temperature does not exceed 350°F.
- 9) Containers for liquefied petroleum gas that do not exceed a

DEPARTMENT OF NUCLEAR SAFETY
NOTICE OF EMERGENCY RULES

- volume of 2,000 U. S. gallons except when used for dispensing to other LPG containers or fuel tanks; and
- 10) Other boilers and pressure vessels listed under Section 5(a) of the Act.
- b) Boilers and pressure vessels listed under Section 5(b) of the Act shall be subject to the requirements of this Part (e.g., design, construction and registration) except for those requirements pertaining to inspection, Inspection Certificates and penalties for operating without a valid Inspection Certificate.

Section 505.60 Access to Facilities and Documents
EMERGENCY

Upon prior notice and subject to requirements contained in the Memorandum of Understanding, Subagreement No. 2, between the Department and the NRC, effective May 15, 1990, representatives of the Department or an Authorized Inspector may enter upon any privately or publicly owned property in this State where a boiler or pressure vessel, including related appurtenances, or a part thereof is being designed, constructed, installed or used within or upon or in connection with a nuclear facility in this State to ascertain whether such boiler or pressure vessel or part, thereof, is designed, constructed, installed and inspected in accordance with the standards of this Part. In addition to the documents required by this Part, owners shall make available to the Department additional documents as the Department determines are required to verify ASME Code and National Board Inspection Code compliance in accordance with this Part. These documents may include, but need not be limited to, such documents as a Quality Assurance Program in effect at the nuclear facility meeting the requirements of the ASME Code, or the details of flaw evaluations. The requirements of this Section are subject to the limitations of Section 505.20(c).

Section 505.70 Notification of Failures
EMERGENCY

- a) Any owner, which includes any person, firm, partnership, corporation or government entity, that knowingly fails to notify the Department within 24 hours, or the next business day of a reportable event, or of any bodily injury or death to any person caused by a reportable event, is guilty of a Class B misdemeanor, if a natural person, or a business offense punishable by a fine of not less than \$501 and not more than \$10,000, if a corporation or government agency.
- b) In the case of a reportable event, the owner of the affected

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

boiler or pressure vessel may take whatever measures it determines in its sole discretion are necessary to give emergency assistance to injured persons or to alleviate any threat to the public health and safety.

- c) In the case of a reportable event, the owner may not move, disturb or repair the affected boiler or pressure vessel until the Department has been given the opportunity to examine the boiler or pressure vessel within twelve hours of the reportable event, except that the owner may initiate an investigation, including the gathering of material for samples and the taking of any ancillary action necessary for such sample gathering, where the owner either determines that such activities will not substantially interfere with the Department's subsequent examination or provides a record of the initial circumstances sufficient to provide the Department with an accurate report of the condition which was obtained before the owner initiated its activities.

- d) The requirements of this Section shall apply to any boiler or pressure vessel including those exempt under Section 505.50.

Section 505.80 Administrative Review and Hearings - Inspection Certificates EMERGENCY

This Section shall apply to all actions by the Department for noncompliance with this Part that potentially could impact upon the issuance, suspension or revocation of an Inspection Certificate required by this Part.

- a) When in any instance departmental review reveals that an owner may not be in compliance with one or more requirements of this Part, the Department will notify the owner in writing of those facts and circumstances known to the Department that give rise to the inference that the owner is not in compliance. If the facts and circumstances giving rise to the inference involves only boilers and pressure vessels that the NRC has determined are not within NRC's jurisdictional authority, subsection (c) below shall apply and subsection (b) below shall not apply. If the facts and circumstances giving rise to the inference involves any other boiler, pressure vessel or nuclear power system, subsection (b) below shall apply and subsection (c) below shall not apply.

- b) Simultaneously with the notification provided for in subsection (a) above, the Department will notify the NRC in writing of those facts and circumstances known to the Department that give rise to the inference that the owner is not in compliance. If the owner fails to demonstrate to the Department that the owner is in

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

compliance within 10 days of the notification, the Department shall provide to the NRC a written request pursuant to 10 CFR 2.200 et seq. (1991), that the NRC take appropriate action, e.g., pursuant to 10 CFR, Part 2, Appendix C (1991). The request will specify the NRC action or actions that the Department is requesting.

- c) If the owner fails to demonstrate to the Department that the owner is in compliance within 10 days of the notification provided for in subsection (a) above, the Department shall issue a Preliminary Order and Notice of Opportunity for Hearing in accordance with 32 Ill. Adm. Code 200. The owner aggrieved by such order may within 15 days submit a written request for hearing to the Department, which shall thereafter hold an adjudicatory hearing in accordance with Section 16 of the Boiler and Pressure Vessel Safety Act, the Illinois Administrative Procedure Act and 32 Ill. Adm. Code 200.

- 1) If after the hearing, the Director finds that the owner or organization was in compliance with the requirements of this Part, the Director shall issue to the owner an Order of Compliance or issue such other order as appropriate.

- 2) If after the hearing or default, the Director finds that the owner is not in compliance with the requirements of this Part, the Director will render a final decision which may include denying an application for, or suspending or revoking an affected Inspection Certificate.

- d) All final administrative decisions of the Director under this Part shall be subject to judicial review pursuant to Section 16 of the Boiler and Pressure Vessel Safety Act.

Section 505.82 Administrative Review and Hearings - Authorized Inspection Agency EMERGENCY

This Section shall apply to any action by the Department to deny an application for, or to suspend or revoke departmental recognition of an Authorized Inspection Agency.

- a) An owner or organization aggrieved by the Department's action pursuant to Sections 505.190(c) or 505.190(e) may within 15 days submit a written request for hearing to the Department, which shall thereafter hold an adjudicatory hearing in accordance with Section 16 of the Boiler and Pressure Vessel Safety Act, the Illinois Administrative Procedure Act and 32 Ill. Adm. Code 200.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

- 1) If after the hearing, the Director finds that the owner or organization was in compliance with the requirements of this Part, the Director shall issue an order directing that recognition be extended to the organization.
- 2) If after the hearing or default, the Director finds that the owner or organization is not in compliance with the requirements of this Part, the Director will render a final decision which may include denying the application for recognition.
- b) All final administrative decisions of the Director under this Part shall be subject to judicial review pursuant to Section 16 of the Boiler and Pressure Vessel Safety Act.

Section 505.84 Administrative Review and Hearings - Special Permits EMERGENCY

This Section shall apply to any action by the Department to deny an application for, or to suspend or revoke a special permit for construction of a non-ASME Code boiler or pressure vessel pursuant to Section 505.2700.

- a) An owner aggrieved by a Departmental denial pursuant to Section 505.2700(c)(6) or departmental action pursuant to Section 505.2700(c)(5) may within 15 days submit a written request for hearing to the Department, which shall thereafter hold an adjudicatory hearing in accordance with Section 16 of the Boiler and Pressure Vessel Safety Act, the Illinois Administrative Procedure Act and 32 Ill. Adm. Code 200.

- 1) If after the hearing, the Director finds that the owner was in compliance with the requirements of this Part or that the affected non-ASME boiler or pressure vessel meets the criteria of Section 505.2700(c), the Director shall issue an order directing that the Special Permit be issued to the owner or organization.

- 2) If after the hearing or default, the Director finds that the owner is not in compliance with the requirements of this Part, the Director will render a final decision which may include denying the application for, or suspending or revoking a Special Permit.

- b) All final administrative decisions of the Director under this Part shall be subject to judicial review pursuant to Section 16 of the Boiler and Pressure Vessel Safety Act.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

Section 505.86 Actions Pending Before the United States Nuclear Regulatory Commission EMERGENCY

Whenever any person brings an action before the NRC pursuant to 10 CFR 2.200 et seq. (1991) alleging that a departmental application of a requirement of this Part could affect the safety or the operation of a nuclear facility, the Department shall not apply or enforce the requirement until such time as the NRC concurs in the application or enforcement or until the NRC otherwise finds and notifies the Department that the application of the requirement could not affect the safety or the operation of the nuclear facility.

Section 505.90 Address and Telephone Number for Notifications and Inquiries EMERGENCY

Written reports or communications concerning or required by this Part shall be addressed to: Code Compliance Section, Office of Nuclear Facility Safety, Illinois Department of Nuclear Safety, 1035 Outer Park Drive, Springfield, Illinois 62704. The Department may be reached by telephone at (217) 785-9900.

Section 505.100 Standards for Design, Construction, Operation and Inspection (general) EMERGENCY

Please refer to Section 505.1000 for ISI boilers and pressure vessels and Section 505.2000 for non-ISI boilers and pressure vessels.

Section 505.110 Registration Requirements (general) EMERGENCY

- a) The requirements of this Section are subject to the limitations of Section 505.20(c).

- b) The owner of a nuclear facility shall register with the Department all boilers and pressure vessels contained within or upon or in connection with the nuclear facility unless exempt under Section 505.50(a), as follows:

- 1) For each boiler and pressure vessel already in operation and registered with the Office of the State Fire Marshal on the effective date of this Part, the owner shall submit within 180 days of the effective date of this Part evidence supporting existing registration through the Office of the State Fire Marshal and the additional information required by Sections 505.1100 or 505.2100, as applicable. Such evidence shall include the State serial number assigned to

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

the boiler or pressure vessel, a description of the boiler or pressure vessel and the nuclear power system to which the boiler or pressure vessel belongs.

- 2) For each boiler and pressure vessel already in operation and not registered with the Office of the State Fire Marshal on the effective date of this Part, the owner shall submit within 90 days from the effective date of this Part the information required by Sections 505.1100 or 505.2100, as applicable.
- 3) For each boiler and pressure vessel installed after the effective date of this Part, the owner shall register the boiler or pressure vessel prior to its operation in accordance with Sections 505.1100 or 505.2100, as applicable.
- c) After the effective date of this Part, manufacturer's Data Reports shall be filed by the owner with the Department for new installation and reinstallation of boilers and pressure vessels at nuclear facilities unless otherwise exempted by Section 505.50(a). If a boiler or pressure vessel is of special design or will not bear the ASME stamp, then the owner shall additionally comply with the requirements of Sections 505.170 and 505.1700 or Section 505.2700 for non-ASME Code ISI or non-ISI boilers and pressure vessels, respectively.

AGENCY NOTE: Data Reports as used in this subsection refers to those documents completed as required by the construction code applicable to the boiler or pressure vessel.

- d) Each boiler or pressure vessel subject to the Act shall be identified by a serial number of the State of Illinois. If a State serial number has not already been assigned by the OSFM, a number will be assigned by the Department and applied by the Authorized Inspector. Additionally, the ASME Code required stamping shall be kept free of paint and lagging so that it will be plainly visible and easily read by the Inspector.
- e) The State serial number on boilers shall not be less than 5/16" in height and shall be preceded by the letters "ILL" which shall also be not less than 5/16" in height. Boilers will be identified by a five digit number. The State serial number on unfired pressure vessels shall be not less than 5/16" in height and shall be preceded by the letters "ILL" and the letter "U" which also shall be not less than 5/16" in height. Unfired pressure vessels will

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

be identified by a six digit number. The Inspector shall make certain that the correct Illinois State serial number is affixed to the boiler or pressure vessel.

- f) The requirements of subsections (d) and (e) above for the physical application of the State serial number may be waived if a system to identify the boiler or pressure vessel with the assigned State serial number has been established and the system of identification is acceptable to the Department.
- g) A Certificate Inspection shall be made of all used or second-hand boilers or pressure vessels prior to operation at a nuclear facility in this State. In a case where a boiler or pressure vessel is moved and reinstalled the fittings and appliances shall be upgraded to comply with the rules for new installations.

Section 505.120 Inspection Certificates (general)
EMERGENCY

- a) Inspection Certificates for nuclear power systems shall be issued in accordance with Section 505.1200. Inspection Certificates for non-ISI boilers and pressure vessels shall be issued in accordance with Section 505.2200. Both nuclear power systems and non-ISI boilers and pressure vessels and their Inspection Certificates shall be subject to the provisions of subsections (b) and (c) below.

- b) Owners shall keep the Inspection Certificate in an accessible location.
- c) Boilers and pressure vessels that change classification (i.e., to or from ISI or non-ISI) as a result of additions to or deletions from the Inservice Inspection Plan shall be subject to the registration and submittal requirements of the new classification. To reduce the administrative burden on the owner, the owner need only inform the Department of all previous submittals made on behalf of existing registration which the owner intends to apply to the new classification.

Section 505.130 Operation Requirements (general)
EMERGENCY

- a) The requirements of this Section are subject to the limitations of Section 505.20(c).
- b) Any person, firm, partnership or corporation violating any of the

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

provisions of this Part shall be subject to the penalties provided in the Act.

- c) An Inspection Certificate may be suspended by the Department if an ISI or non-ISI boiler or pressure vessel or nuclear power system is in operation but not in compliance with this Part.
- d) An Inspection Certificate may be suspended by the Department if an ISI or non-ISI boiler or pressure vessel or nuclear power system is being operated in an unsafe condition.
- e) If the owner of each boiler or pressure vessel or nuclear power system required to be inspected refuses or fails to allow an inspection to be made, the Department shall take action to suspend the Inspection Certificate under Section 505.80 until the owner complies with the requirements.
- f) For any boiler or pressure vessel that has been inspected and declared unsafe by an Authorized Inspector, the Authorized Inspector shall notify the Department of his intention to condemn the boiler or pressure vessel. The Department shall act in accordance with subsection (g) below for such ISI or non-ISI boilers or pressure vessels.
- g) Upon being notified under the provisions of subsection (f) above, the Department shall take action concerning the affected Inspection Certificate in accordance with Section 505.80.
- h) The owner who causes a non-ISI boiler or pressure vessel or nuclear power system to be operated without a valid Inspection Certificate shall be subject to the penalty as provided in the Act.

i) Removal of Safety Appliances.

- 1) No person, except under the direction of an Authorized Inspector, shall attempt to remove or shall do any work upon safety appliances, required by this Part while a boiler or pressure vessel is in operation. If any of these appliances are repaired during an outage of a boiler or pressure vessel, they shall be reinstalled and in proper working order before the object is again placed in service.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

- 2) No person shall in any manner load the safety valve or valves to maintain a working pressure in excess of that stated on the Inspection Certificate.

Section 505.140 Inspection Requirements (general)
EMERGENCY

- a) The requirements of this Section are subject to the limitations of Section 505.20(c).
- b) If, upon inspection and notification by an Authorized Inspector, a boiler or pressure vessel at a nuclear facility is found to be in such condition that it is unsafe to operate, the Department, subject to the limitations of Section 505.20(c), shall act to suspend the Inspection Certificate in accordance with Section 505.80.
- c) Owners shall assure that examinations and tests are conducted in accordance with the methods and frequencies established by this Part.
- d) In addition to the reporting frequencies specified in this Part, the owner shall report to the Department within 72 hours when, on the basis of observation or objective information, the owner has reason to believe that an ISI or non-ISI boiler or pressure vessel or nuclear power system does not meet the standards of this Part.
- e) Inspections shall be conducted by Authorized Inspectors.

Section 505.150 Repairs and Alterations (general)
EMERGENCY

Please refer to Section 505.1500 for ISI boilers and pressure vessels and Section 505.2500 for non-ISI boilers and pressure vessels.

Section 505.160 Code Case Applications (general)
EMERGENCY

The owner may, at his discretion, elect to use an ASME Code Case to design, construct, examine, test, repair or alter a boiler or pressure vessel. The owner shall notify the Department of all intentions to use a Code Case and the extent and nature of the use of the Code Case for the particular application.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

Section 505.170 Issuance of Permits and Registration of Non-ASME Code Boilers and Pressure Vessels (State Specials) (general)

- a) The Department may issue special permits for boilers and pressure vessels at nuclear facilities which for some reason were not constructed in accordance with the applicable ASME Code Section. The Department shall issue special permits in accordance with Section 505.1700 or Section 505.2700, as applicable.
- b) Owners may request the Department to issue a special permit for an object not constructed in accordance with the applicable ASME Code Section.
- c) Upon completion of construction and installation, the owner shall register the non-ASME Code boiler or pressure vessel with the Department. The owner shall demonstrate compliance with the provisions of the special permit. The owner shall meet the applicable registration requirements for either ISI boilers and pressure vessels in Sections 505.1100 and 505.1200 or non-ISI boilers and pressure vessels in Sections 505.2100 and 505.2200.

Section 505.180 Authorized Inspectors (general)

- a) To inspect ISI or non-ISI boilers or pressure vessels at nuclear facilities within the State an individual shall hold a Commission as a Special Inspector and an identifying commission card issued by the Office of the State Fire Marshal as provided in Section 8 of the Act.
- b) If an Authorized Inspector finds that the boiler or pressure vessel or any of its appurtenances are in an unsafe condition the Inspector shall immediately notify the Department and submit a report of the defects.
- c) The requirements of this Section are subject to the limitations of Section 505.20(c).
- d) Authorized Inspectors shall perform all duties required of them under the ASME Code or the National Board Inspection Code, as applicable. Authorized Inspectors shall notify the Department within 7 days if they have knowledge of a nuclear power system or a ISI or non-ISI boiler or pressure vessel that:
 - 1) is being operated without a valid Inspection Certificate;

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

- 2) is being operated at a pressure which exceeds indicated pressure on the Inspection Certificate; or
 - 3) otherwise deviates from the requirements of this Part.
- e) Inspectors inspecting ISI boilers or pressure vessels, or nuclear power systems shall meet the requirements of Section 505.1800.

Section 505.190 Authorized Inspection Agencies (general)

EMERGENCY

- a) An organization that is providing ASME Code or National Board Inspection Code inspection services at a nuclear facility on the effective date of this Part shall be automatically recognized by the Department as an Authorized Inspection Agency. Such an organization shall, within 30 days of the effective date of this Part, notify the Department in writing that it is providing such inspection services. The notification shall also list the ASME Code Sections/National Board Inspection Code to which it conducts inspection activities.
- b) An organization that wishes to provide ASME Code or National Board Inspection Code inspection services at a nuclear facility but is not doing so as of the effective date of this Part shall be recognized as an Authorized Inspection Agency by the Department in accordance with subsection (c) below prior to providing ASME Code or National Board Inspection Code inspection services at a nuclear facility. Such an organization shall submit the following to the Department:
 - 1) A written request for recognition as an Authorized Inspection Agency;
 - 2) A list of the names of Authorized Inspectors employed; and
 - 3) A written description of the types of inspections that the organization will perform and the ASME Code Sections/National Board Inspection Code to which it will conduct inspection activities.
- c) The Department shall, within 90 days of receipt of an organization's request submitted pursuant to this Section, recognize the organization as an Authorized Inspection Agency upon determining that it has demonstrated in the request that it meets all qualification, duty and other requirements in those ASME Code Sections/National Board Inspection Code for which it wishes to

DEPARTMENT OF NUCLEAR SAFETY

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

NOTICE OF EMERGENCY RULES

provide inspection services. If it is determined that an organization's request submitted pursuant to this Section does not meet the requirements of this Section, the Department shall take action under Section 505.82.

AGENCY NOTE: Qualification, duty and other requirements for organizations in subsections (b) and (c) above shall be in accordance with the latest edition and addenda of the ASME Code/National Board Inspection Code referenced in Section 505.40.

d) The Office of the State Fire Marshal of the State of Illinois is exempt from all the requirements of this Section.

e) If the Department determines that an Authorized Inspection Agency is not qualified, the Department shall act to suspend or revoke its recognition of the Authorized Inspection Agency under Section 505.82.

AGENCY NOTE: Applicable ASME Code Sections/National Board Inspection Code as used in this Section means those under which the inspection agency is performing inspection activities. Departmental reviews will determine whether the organization meets all requirements for Authorized Inspection Agencies as found in the most recent edition and addenda of the ASME Code or National Board Inspection Code, as applicable, referenced in Section 505.40.

f) Authorized Inspection Agencies that are writing boiler or pressure vessel risks on the effective date of this Part shall notify the Department of all such risks being written within 30 days of the effective date of this Part.

g) Following the notification of subsection (f) above, Authorized Inspection Agencies shall notify the Department within 30 days of all new boiler or pressure vessel risks written.

h) Within 30 days following each inspection required by this Part, the Authorized Inspection Agency shall submit an accurate report of the results of such inspection to the Department in accordance with this Part.

SUBPART B: ISI BOILERS AND PRESSURE VESSELS

Section 505.1000 Standards for Design, Construction, Operation and Inspection EMERGENCY

ISI boilers and pressure vessels, including related appurtenances, except those exempt under Section 505.50(a), installed or operated within or upon or in connection with a nuclear facility in Illinois shall be designed, constructed, installed, stamped, examined, tested, repaired, altered and inspected in accordance with Sections III and XI of the ASME Code or with other codes and standards as reflected in the facility's Operating License, Final Safety Analysis Report, technical specifications or other licensing documents as required or approved by the NRC.

Section 505.1100 Registration Requirements EMERGENCY

For registration of each ISI boiler and pressure vessel, except those exempt under Section 505.50(a), the owner shall submit the following to the Department. If the submittal applies to a collection of ISI boilers and pressure vessels, the owner shall submit the documentation once for the ISI boilers and pressure vessels included in the submittal. If it is determined that any of the documents have previously been submitted to the Department or the Office of the State Fire Marshal, the owner does not have to resubmit them.

- a) A controlled copy of the Inservice Inspection Plans for the nuclear power system;
- b) Cross references to the State serial numbers, and National Board serial numbers if available, for all ISI boilers and pressure vessels in the Inservice Inspection Plan;
- c) For a nuclear power system that has not yet completed the first inspection period, preservice inspection summary reports for the nuclear power system;
- d) For ISI boilers and pressure vessels in operation as of the effective date of this Part:
 - 1) The Owner's Data Report, form NIS-1 of ASME Code Section XI, for inservice inspections conducted during the inservice inspection interval in effect on the effective date of this Part;
 - 2) The Owner's Report for Repair or Replacement, form NIS-2 of

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

ASME Code Section XI, if required by the applicable Code Edition and Addenda or Code Case used, for repair and replacement of ISI boilers and pressure vessels conducted during the inservice inspection interval in effect on the effective date of this Part; and

- 3) Inservice inspection summary reports for inservice inspections conducted during the inservice inspection interval in effect on the effective date of this Part.
- e) For boilers and pressure vessels covered by this Section, owners shall meet the requirements of Section 505.110.

Section 505.1200 Inspection Certificates EMERGENCY

This Section is not intended to be, in any way, inconsistent with the applicable regulations, rules and requirements of the NRC. If a requirement of this Section as applied in any situation is or would be inconsistent with the regulations, rules and requirements of the NRC, the requirements of this Section shall not be applied. The Department will take action in regard to an Inspection Certificate only in accordance with Section 505.80. The Department shall issue Inspection Certificates for nuclear power systems in accordance with this Section if the reports, programs and plans required to be submitted by Sections 505.110, 505.1100 and this Section are submitted in accordance with the frequencies and standards specified therein and are in compliance with this Part.

- a) Owners of nuclear power systems already in operation on the effective date of this Part shall not operate such nuclear power systems after one year from the effective date of this Part without a valid Inspection Certificate issued by the Department. Operation of such nuclear power systems beyond this one year grace period without a valid Inspection Certificate shall constitute noncompliance with this Part.
- b) Owners of nuclear power systems not yet in operation on the effective date of this Part shall, prior to operation of such nuclear power systems, have a valid Inspection Certificate issued by the Department for such nuclear power systems.
- c) The Department shall issue one Inspection Certificate for each nuclear power system at a nuclear facility. Unless suspended by the Department, the Inspection Certificate shall remain valid through the six month period following the end of the inservice

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

inspection period for which such Certificate was issued, or as otherwise permitted by this Part.

- d) For nuclear power systems already in operation on the effective date of this Part, the Department shall issue the initial Inspection Certificates for the remainder of the inservice inspection period in effect on the effective date of this Part based on determination by the Department that the submittal requirements of Section 505.1100 and this Section are met.
- e) For nuclear power systems not yet in operation on the effective date of this Part, the Department shall issue the initial Inspection Certificates for the first inservice inspection period based on a Department determination that the submittal requirements of Section 505.1100 are met.
- f) An Inspection Certificate shall be issued for each nuclear power system at the nuclear facility for the succeeding inservice inspection period when the Department determines that:
 - 1) The examinations and tests required by the Inservice Inspection Plan during the preceding inservice inspection period were completed; and
 - 2) All related submittal requirements of this Part are met.

AGENCY NOTE: In order to determine whether the examinations and tests required by the Inservice Inspection Plan during the preceding inspection period were performed and completed, the Department will review the submittals required by this Section against the Inservice Inspection Plan and the applicable edition and addenda of the ASME Code Section XI. The above review and determination will be made separately for each nuclear power system. During this review the Department shall accept requests for relief from ASME Code Section XI requirements that have been approved by the NRC.

- g) The inservice inspection interval for the nuclear power system may be extended or reduced as permitted by the applicable Code edition and addenda or that has been approved by the NRC. The owner shall notify the Department in writing of any such change in the inservice inspection interval. The Department may issue a new Inspection Certificate, or may adjust the term of the Inspection Certificate in effect for the applicable inservice inspection period.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

- h) When the owner discovers that an ISI boiler or pressure vessel is not in compliance with this Part, the owner shall take measures to bring the ISI boiler or pressure vessel into compliance. Such measures may include, but are not limited to, repair or replacement of the ISI boiler or pressure vessel in accordance with Section 505.1500. In such cases, the owner shall notify the Department in accordance with Section 505.140. The owner shall submit information concerning the details of the noncompliance and the measures taken to bring the noncomplying ISI boiler or pressure vessel into compliance to the Department within 90 days following the completion of such corrective measures. Any replacement ISI boiler or pressure vessel shall meet the requirements of this Part for new boilers and pressure vessels and shall be registered by the owner with the Department in accordance with Section 505.1100. The Department shall review the information submitted regarding the noncompliance and the corrective measures taken and may issue a revised Inspection Certificate to reflect any change in nuclear power system composition.

- i) The owner shall submit the following:

- 1) In addition to the information submitted under Section 505.1100, the owner shall submit the following to the Department within 90 days after completing an inservice inspection:
 - A) The inservice inspection summary report required by ASME Code Section XI;
 - B) The Owner's Data Report, form NIS-1 required by ASME Code Section XI;
 - C) The Owner's Report for Repairs or Replacements, form NIS-2 of Section XI, if required by the applicable Code Edition and Addenda or Code Case used, for all repairs and replacements performed since the last inservice inspection; and
 - D) Deviations from the Inservice Inspection Plan implemented during inservice inspections that impact upon compliance with this Part.
- 2) The owner shall submit the Inservice Inspection Plan for the next inservice inspection interval to the Department prior to the end of each inservice inspection interval.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

- j) If the Department finds that:

- 1) The submittals in subsection (i) above have not been made or are incomplete; or
 - 2) The examinations and tests required by the owner's Inservice Inspection Plan have not been performed or are incomplete; or
 - 3) The owner has not met the requirements of subsection (h) above; or
 - 4) The nuclear power system is not being inspected in accordance with this Part;
- the Department shall take action under Section 505.80.
- k) In addition to the above requirements, owners shall meet the requirements of Section 505.120.

Section 505.1300 Operation Requirements
EMERGENCY

ISI boilers and pressure vessels shall meet the requirements of Section 505.130.

Section 505.1400 Inspection Requirements
EMERGENCY

ISI boilers and pressure vessels shall meet the requirements of Section 505.140.

Section 505.1500 Repairs
EMERGENCY

Repairs of ISI boilers and pressure vessels and pressure relief valves associated with ISI boilers and pressure vessels, except boilers and pressure vessels and those pressure relief valves associated with boilers and pressure vessels that are exempt under Section 505.50(a), shall be made in accordance with this Section.

- a) ISI boilers and pressure vessels shall be repaired in accordance with the applicable repair and replacement requirements of Section XI of the ASME Code or other codes and standards as reflected in the facility's Operating License, Final Safety Analysis Report,

technical specifications or other licensing documents as required or approved by the NRC.

- b) Pressure relief valves associated with ISI boilers and pressure vessels shall be repaired in accordance with the applicable repair and replacement requirements of Section XI of the ASME Code or other codes and standards as reflected in the facility's Operating License, Final Safety Analysis Report, technical specifications or other licensing documents as required or approved by the NRC.

Section 505.1600 Code Case Applications
EMERGENCY

- a) Approval to use an ASME Code Case for ISI boilers and pressure vessels is vested in the NRC. The Department shall accept all ASME Code Cases approved for use by the NRC.
- b) Owners shall meet the notification requirements of Section 505.160 in all cases involving the use of Code Cases for ISI boilers or pressure vessels.

Section 505.1700 Issuance of Permits and Registration of Non-ASME Code Boilers and Pressure Vessels (State Specials)
EMERGENCY

- a) Approval to permit an owner to use alternative standards for construction of an ISI boiler or pressure vessel is vested in the NRC. The Department shall accept alternative construction standards that have been accepted by the NRC.
- b) Owners shall meet the requirements of Section 505.170 in all cases involving use of alternative standards for the construction of ISI boilers or pressure vessels.

Section 505.1800 Authorized Inspectors
EMERGENCY

In order to perform the duties of an Authorized Inspector for ISI boilers and pressure vessels or nuclear power systems at nuclear facilities within the State, the individual must, in addition to the requirements of Section 505.180, hold a current endorsement with either a nuclear ("N" or "SI") or an inservice ("I" or "IS") designation, as appropriate, issued by the National Board. Specific endorsement and corresponding titles are as follows:

- a) Authorized Nuclear Inspector ("N" Endorsement);

- b) Authorized Nuclear Inspector Supervisor ("S" Endorsement);
- c) Authorized Nuclear Inservice Inspector ("I" Endorsement); or
- d) Authorized Nuclear Inservice Inspector Supervisor ("IS" Endorsement).

Section 505.1900 Authorized Inspection Agencies
EMERGENCY

- a) Organizations seeking to provide inspection services to the requirements of ASME Code Section III, Section XI, or both, shall be subject to the requirements of this Section and Section 505.190.
- b) The request for recognition submitted in Section 505.190(b) shall also contain documentation demonstrating that the organization meets the ASME Code and ASME/ANSI N626 qualifications for Authorized Inspection Agencies for the scope of inspection activities, including the possession of a valid ASME Certificate of Accreditation.
- c) The Department shall act in accordance with Section 505.190(c) on all requests for recognition submitted in accordance with this Part.

SUBPART C: NON-ISI BOILERS AND PRESSURE VESSELS

Section 505.2000 Standards for Design, Construction, Operation and Inspection
EMERGENCY

Non-ISI boilers and pressure vessels, including related appurtenances, except those exempt under Section 505.50(a), operated within or upon or in connection with a nuclear facility in Illinois shall be designed, constructed, installed, examined, tested, repaired, altered and inspected as required by this Section, except in those cases where NRC has jurisdiction, as determined by NRC. Where NRC has jurisdiction, the codes and standards reflected in the facility's Operating License, Final Safety Analysis Report, technical specifications, or other licensing documents as required or approved by the NRC shall apply. For non-ISI boilers and pressure vessels over which NRC has no jurisdiction, as determined by NRC, the standards required by this Part apply. If the NRC determines that NRC has jurisdiction, but has not established standards, the Department may propose to NRC that these or other standards be applied to such boilers and pressure vessels in nuclear power plants in Illinois.

- a) All new, existing and reinstalled non-ISI boilers, including

DEPARTMENT OF NUCLEAR SAFETY

93

NOTICE OF EMERGENCY RULES

related appurtenances, shall be designed, constructed, installed, examined, tested, repaired and altered in accordance with the ASME Code or National Board Inspection Code, as applicable, and inspected in accordance with this Part. Where a non-ISI boiler is moved and reinstalled, the fittings and appliances of that boiler shall comply with this Part.

- b) All non-ISI pressure vessels installed and placed in operation after December 31, 1976 and all reinstalled non-ISI pressure vessels, including related appurtenances, shall be designed, constructed, installed, tested, examined, repaired and altered in accordance with the ASME Code or National Board Inspection Code, as applicable, and inspected in accordance with this Part. Where a non-ISI pressure vessel is moved and reinstalled, the fittings and appliances of that pressure vessel shall comply with this Part.
- c) Non-ISI pressure vessels and related appurtenances installed and placed in operation at nuclear facilities on or before December 31, 1976 shall be inspected in accordance with this Part and designed, constructed, installed, tested, repaired and altered, in accordance with the following requirements.

- 1) The MAWP for standard pressure vessels shall be determined in accordance with the applicable provisions of the ASME Code under which they were constructed and stamped.

2) MAWP for Non-standard Pressure Vessels

- A) The MAWP of a non-standard pressure vessel subject to internal pressure shall be determined by the strength of the weakest course computed from the thickness of the plate, the tensile strength of the plate, the efficiency of the longitudinal joint, the inside diameter of the course and the factor of safety set by this Part, as permitted below.

$$(TS \cdot t \cdot E) / (R \cdot FS) = \text{MAWP, in psig, where:}$$

TS = ultimate tensile strength of shell plate, in psi.
When the tensile strength of steel plate is not known, it shall be taken as 55,000 psi for temperature not exceeding 650° F.

DEPARTMENT OF NUCLEAR SAFETY

93

NOTICE OF EMERGENCY RULES

t = minimum thickness of shell plate of weakest course, in inches.

E = efficiency of longitudinal joint, depending upon construction. Use the following values:

For Fusion-Welded and Brazed Joints:	
Single lap welded.....	40
Double lap welded.....	60
Single butt welded.....	60
Double butt welded.....	75
Forge welded.....	70
Brazed steel.....	80

For riveted joints -- calculate riveted joint efficiency in accordance with rules given in Section I, Part PR, of the 1971 ASME Code.

R = inside radius for weakest shell course, in inches, provided the thickness does not exceed 10 percent of the radius. If the thickness is over 10 percent of the radius, the outer radius shall be used.

FS = factor of safety permitted shall be a minimum of 5.0.

- B) The MAWP for cylindrical non-standard pressure vessels subject to external or collapsing pressure shall be determined by the rules in Par. UG-27 and UG-28 of the ASME Code Section VIII.

- C) The minimum factor of safety may be increased when deemed necessary by the Inspector to assure the operation of the vessel within safe limits. The condition of the vessel and the particular service to which it is subject will be determining factors.

- D) The MAWP permitted for formed heads under pressure shall be determined by using the appropriate formulas from UG-32 or UG-33 of the ASME Code Section VIII and the tensile strength and efficiencies given above.

- 3) Containers for liquified petroleum gas not otherwise exempt shall be equipped with ASME Code stamped spring-loaded safety relief valves and the start to discharge setting of such safety relief valves with relation to the design

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

pressure of the container shall be in accordance with the following table:

Safety Relief Valve Settings

Construction Code	Minimum	Maximum
All Section VIII ASME Codes prior to and including the 1949 Edition, paragraphs U-68 and U-69	110 percent	125 percent
ASME Code Section VIII including the 1949 Edition and later editions, paragraphs U-200 and U-201	100 percent	100 percent

d) All non-ISI boilers and pressure vessels shall be inspected in accordance with Chapter II of the National Board Inspection Code and this subsection. The following general requirements shall apply to all non-ISI boilers and pressure vessels.

- 1) The owner shall prepare each boiler and pressure vessel for internal inspection in accordance with Chapter II of the National Board Inspection Code. The Authorized Inspector should not enter any boiler or pressure vessel before he is satisfied that all necessary safety precautions from Chapter II of the National Board Inspection Code have been taken, including testing the boiler or pressure vessel atmosphere for oxygen and toxic, flammable and inert gases.
- 2) The owner shall prepare for and apply the hydrostatic test, whenever necessary, on a date agreeable to the owner and the Authorized Inspector.

e) All cases not specifically covered by this Part shall be treated as new installations. Existing non-ISI boilers and pressure vessels shall be governed by current ASME Code and National Board Inspection Code requirements or the requirements of the ASME Code in effect at the time of construction.

Section 505.2100 Registration Requirements
EMERGENCY

For registration of each non-ISI boiler or pressure vessel, except those exempt under Section 505.50(a), the owner shall submit the following to the

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

Department. If the submittal applies to a collection of non-ISI boilers and pressure vessels, the owner shall submit the documentation once for the non-ISI boilers and pressure vessels included in the submittal.

- a) For each non-ISI boiler and pressure vessel already registered with the Office of the State Fire Marshal on the effective date of this Part, the owner shall submit the information required by Section 505.110.
- b) For each non-ISI boiler and pressure vessel registered after the effective date of this Part, the owner shall submit any manufacturer's Data Reports related to the construction, repair, replacement or alteration of the non-ISI boiler or pressure vessel and its appurtenances.

AGENCY NOTE: Data Reports as used in subsections (a) and (b) above refers to those documents completed as required by the construction or inspection code applicable to the non-ISI boiler or pressure vessel.

- c) For boilers and pressure vessels covered by this Section, owners shall meet the requirements of Section 505.110.

Section 505.2200 Inspection Certificates
EMERGENCY

This Section is not intended to be, in any way, inconsistent with the applicable regulations, rules and requirements of the NRC. If a requirement of this Section as applied in any situation is or would be inconsistent with the regulations, rules and requirements of the NRC, the requirements of this Section shall not be applied. The Department will take action in regard to an Inspection Certificate only in accordance with Section 505.80. The Department shall issue Inspection Certificates for non-ISI boilers and pressure vessels in accordance with this Section if the reports, inspection criteria and plans required to be submitted by and identified in Sections 505.110, 505.2100 and this Section are submitted in accordance with the frequencies specified therein and are in compliance with this Part.

- a) The Department shall issue one Inspection Certificate to each non-ISI boiler and pressure vessel for a term equal to the frequency of inspection of the non-ISI boiler or pressure vessel as follows:

- 1) Power boilers, high pressure water boilers and high temperature water boilers shall be inspected annually, which shall be an internal inspection where conditions permit. Such boilers shall also be inspected externally annually

while under representative operating conditions, if possible.

- 2) Low pressure steam boilers, hot water heating boilers and hot water supply boilers shall be inspected every two years. Such inspection shall be internal and external, where conditions permit. An external inspection shall be conducted under representative operating conditions at the request of the Authorized Inspector.
- 3) Pressure vessels subject to internal corrosion shall be inspected every three years. Such inspection shall be external and internal, where conditions permit.
- 4) Pressure vessels not subject to internal corrosion shall be inspected externally every three years.

AGENCY NOTE: External inspection may be waived by the Department due to inaccessibility of the equipment, based on the owner's detailed assessment of documentation and performance data verifying vessel integrity.

- 5) Inspection of flame safeguard equipment shall be to the standards of Section 505.40(c) and will be in conjunction with the regular inspection of boilers.
- 6) A grace period of 2 months beyond the period specified in (1) or (2) above, may elapse between internal inspections of the boiler while it is not under pressure and the external inspection of the boiler while it is under pressure.

- b) The date of issuance of the Inspection Certificate shall be the same as the inspection date shown on the completed Report of Inspection.

- c) The Department shall issue an initial Inspection Certificate for a non-ISI boiler or pressure vessel as follows:

- 1) For non-ISI boilers and pressure vessels having a valid Inspection Certificate issued by the Office of the State Fire Marshal as of the effective date of this Part, the Department shall automatically recognize such an Inspection Certificate until expiration or until the Department issues an Inspection Certificate in accordance with this Part, whichever is earlier. Application for an Inspection

Certificate shall be in accordance with subsection (g) below.

- 2) Owners of a non-ISI boiler or pressure vessel not yet in operation on the effective date of this Part must, prior to operation of such a boiler or pressure vessel have a valid Inspection Certificate issued by the Department in accordance with this Part. Application for an Inspection Certificate shall be in accordance with subsection (g) below except that the owner shall submit the documents listed in (g)(2) below at least 90 days prior to operating such a boiler or pressure vessel.
- 3) Owners of a non-ISI boiler or pressure vessel in operation on the effective date of this Part but not having a valid Inspection Certificate issued by the Office of the State Fire Marshal may not operate such a boiler or pressure vessel after 180 days from the effective date of this Part without a valid Inspection Certificate issued by the Department in accordance with this Part. Requests for an Inspection Certificate shall be in accordance with subsection (g) below except that:

- A) The owner shall submit the documents listed in subsection (g)(2)(A) below no later than 30 days prior to the end of the 180 day period.

- B) The document submittals in subsection (g)(2)(B) below shall be those documents, if any, completed within the 3 year period prior to the effective date of this Part. The owner shall submit such documents within 90 days from the effective date of this Part.

- d) For other than initial issuance of an Inspection Certificate in accordance with subsection (c) above, the Department shall issue an Inspection Certificate for each non-ISI boiler or pressure vessel at the nuclear facility in accordance with this Section when the Department determines that:

- 1) The inspections applied to the non-ISI boiler or pressure vessel were completed;
- 2) The Report of Inspection or similar report form was completed for the non-ISI boiler or pressure vessel and was submitted to the Department in accordance with subsection (g)(2) below; and

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

- 3) All submittals in subsections (f) and (g) below are met.
- e) The Department shall issue the Inspection Certificate within 90 days following receipt of the Report of Inspection on the non-ISI boiler or pressure vessel, or shall observe the procedures of subsection (h) below. The latter shall occur either within 90 days following receipt of the Report of Inspection or within 10 days following the expiration date of the Inspection Certificate.
- f) The Inspection Certificate issued for the non-ISI boiler or pressure vessel as established by this Section may be extended for a maximum of one year.
 - 1) For boilers, other than power boilers, high pressure water boilers, high temperature water boilers and for pressure vessels, the owner shall request permission from the Department to extend the term of the Inspection Certificate prior to implementing the extension. The Department shall review a request for extension and permit such extension where the extension does not increase the risk to the public safety.
 - 2) For power boilers, high pressure water boilers and high temperature water boilers, the Department may extend, for a time not exceeding one year, the time within which the power boiler is required to be internally inspected, subject to the following conditions and qualifications:
 - A) The analysis and treatment of feedwater for such power boilers shall be under the supervision of person qualified in the field of water chemistry.
 - B) The analysis and treatment of the boiler feedwater shall be for the purpose of controlling and limiting serious deteriorating, crusting and sludge that affect the safety of the boiler.
 - C) The owner of such boilers shall maintain, for examination by the Inspector, accurate records of such chemical and physical laboratory analysis of samples of the boiler water taken at regular intervals of not more than twenty-four (24) hours operation and of the treatment applied. These records shall specify dates and times of analyses, by whom analyzed, and the treatment applied at that time and shall be certified by the responsible authority. These records will

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

- adequately show the conditions of such water and any constituents or characteristics which are capable of producing corrosion or other deterioration of the boiler or its parts.
- D) Application for extension shall be in writing setting forth facts establishing compliance with the foregoing conditions and qualifications, and shall be accompanied by the report of external inspection.
 - g) For each non-ISI boiler or pressure vessel, the owner shall submit the following:
 - 1) The information required by Section 505.2100;
 - 2) At least 90 days before the expiration date of the Inspection Certificate issued to the non-ISI boiler or pressure vessel:
 - A) The completed Report of Inspection or similar report form documenting that the inspections were performed in accordance with the inspection criteria and frequency requirements of subsection (a) above and Section 505.2100.
 - B) All Code Data Reports and all other information related to the repair, replacement or alteration of the non-ISI boiler or pressure vessel or its appurtenances performed since the last Certificate Inspection.
 - h) If the Department finds that:
 - 1) The submittals and notifications required by subsections (f) and (g) above have not been made or are incomplete; or
 - 2) The inspections required by this Section have not been performed or are incomplete; or
 - 3) A change to the inspection frequency applied to the non-ISI boiler or pressure vessel is not in accordance with subsection (f) above; or
 - 4) The non-ISI boiler or pressure vessel was insured and the insurance has been canceled or has otherwise become ineffective;

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

the Department shall take action under Section 505.80.

- i) In addition to the above requirements, owners shall meet the requirements of Section 505.120.

Section 505.2300 Operation Requirements

EMERGENCY

Non-ISI boilers and pressure vessels shall meet the requirements of Section 505.130.

Section 505.2400 Inspection Requirements

EMERGENCY

- a) If, upon an external inspection, there is evidence of a leak or crack, enough of the covering of the non-ISI boiler or pressure vessel shall be removed so that the Authorized Inspector may determine the condition of the non-ISI boiler or pressure vessel. If removing the covering could create a situation which could effect the operability or safety of the vessel, the limitations of Section 505.20(c) shall apply.

- b) Owners shall permanently maintain inspection data and supporting documents throughout the lifetime of the equipment.

- c) In addition to the above requirements, owners shall meet the requirements of Section 505.140.

Section 505.2500 Repairs and Alterations

EMERGENCY

Repairs and alterations of non-ISI boilers and pressure vessels, and pressure relief valves associated with non-ISI boilers and pressure vessels, except boilers and pressure vessels and those pressure relief valves associated with boilers and pressure vessels that are exempt under Section 505.50(a), shall be made in accordance with this Section. Non-ISI boilers and pressure vessels, and pressure relief valves associated with non-ISI boilers and pressure vessels, that are repaired or altered after the effective date of this Part shall be repaired or altered in accordance with this Section or other codes and standards as reflected in the facility's Operating License, Final Safety Analysis Report, technical specifications or other licensing documents as required or approved by the NRC. The requirements of this Section are subject to the limitations of Section 505.20(c).

- a) The requirements of this subsection are limited to welded repairs and welded and non-welded alterations of non-ISI boilers and

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

pressure vessels. Where requirements for a repair or alteration are not given, it is intended that, subject to approval of the Authorized Inspector, details of design and construction, insofar as practical, will be consistent with the ASME Code for boilers and pressure vessels constructed to the ASME Code, or the code to which the item was originally constructed for boilers and pressure vessels not constructed to the ASME Code or the repair rules of the National Board Inspection Code. If the administrative requirements of this Section cannot be met, attributable to this emergency rulemaking, then the owner may utilize alternative administrative requirements subject to review by the Department following completion of the repair or alteration. The alternative administrative requirements shall be acceptable to the Authorized Inspector.

- 1) All non-ISI boilers and pressure vessels covered by the Act that are repaired after the effective date of this Part shall be repaired by one of the following organizations:

- A) An owner and those organizations under contract to the owner, provided that:

- i) such repairs are made in accordance with a Quality Assurance Program that meets the requirements of 10 CFR 50 Appendix B and has been approved by the NRC;
- ii) all portions of the owner's 10 CFR 50 Appendix B Quality Assurance Program, described in subsection (i) above, that are applicable to a repair activity are applied to the repair; and
- iii) the owner notifies the Department of his intention to apply 10 CFR 50 Appendix B Quality Assurance Program, described in subsection (i) above, to the repair of boilers and pressure vessels.

AGENCY NOTE: The application of the owner's 10 CFR 50 Appendix B Quality Assurance Program, described in subsections (i) and (ii) above, is subject to review by the Authorized Inspector.

- B) An organization in possession of a valid "R" Certificate of Authorization issued by the National Board.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

- C) An organization authorized by the Division of Boiler and Pressure Vessel Safety, Office of the State Fire Marshal, to repair boilers and pressure vessels.
- 2) Repairs shall be initiated only after they have been authorized by the Authorized Inspector who has reviewed and accepted the weld procedures, welders and welding operators qualifications and repair methods. The Authorized Inspector may give prior approval for repairs of a routine nature. In every case the Authorized Inspector shall be advised of each repair under prior agreement.
- 3) All non-ISI boilers and pressure vessels covered by the Act that are altered after the effective date of this Part shall be altered by one of the following organizations:
- A) An owner and those organizations under contract to the owner, provided that:
- i) such alterations are made in accordance with a Quality Assurance Program that meets the requirements of 10 CFR 50 Appendix B and has been approved by the NRC;
 - ii) all portions of the owner's 10 CFR 50 Appendix B Quality Assurance Program, described in subsection (i) above, that are applicable to a alteration activity are applied to the alteration; and
 - iii) the owner notifies the Department of his intention to apply 10 CFR 50 Appendix B Quality Assurance Program, described in subsection (i) above, to the alteration of boilers and pressure vessels.

AGENCY NOTE: The application of the owner's 10 CFR 50 Appendix B Quality Assurance Program, described in subsections (i) and (ii) above, is subject to review by the Authorized Inspector.

- B) An organization in possession of a valid "R" Certificate of Authorization issued by the National Board, provided the alterations are within the scope of such authorization.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

- 4) Alterations shall be initiated only after they have been authorized by the Authorized Inspector who has reviewed and accepted the alteration methods and calculations. If considered necessary, the Authorized Inspector shall make an inspection of the object before granting such authorization.
- 5) Reports documenting repairs and alterations shall be sent to the Department in addition to the distribution required by the National Board Inspection Code.
- A) Documentation of repairs shall be in accordance with Section R-402 of the National Board Inspection Code, except that, in lieu of a form R-1, an alternative form containing equivalent information may be used. All alternative forms shall be signed by the Authorized Inspector. All alternative forms shall be approved by the Department prior to use. The Authorized Inspector shall determine whether the completion of the form R-1 or alternative form is required for routine repairs.
- B) Documentation of alterations shall be in accordance with Section R-502 of the National Board Inspection Code, except that, in lieu of a form R-1, an alternative form containing equivalent information may be used. All alternative forms shall be signed by the Authorized Inspector. All alternative forms shall be approved by the Department prior to use.
- 6) Repairs and alterations shall be accepted by either an Authorized Inspector employed by the Authorized Inspection Agency responsible for the boiler or pressure vessel or by an Authorized Inspector employed by the Authorized Inspection Agency of record for the organization making the repair or alteration.
- 7) It shall be the responsibility of the organization making the repair or alteration to coordinate the acceptance inspection of the repair or alteration.
- 8) For pressure parts, the rules of Section R-307 of the National Board Inspection Code shall apply, except that references to Sections R-404 and R-505 in Section R-307 of the National Board Inspection Code shall be read as Sections 505.2500(a)(1) and 505.2500(a)(3).

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

9) Pressure Testing

- A) The Authorized Inspector may require a pressure test after completing a repair to a boiler or pressure vessel when in the Authorized Inspector's judgment one should be conducted.
- B) A pressure test in accordance with the National Board Inspection Code shall be applied to the boiler or pressure vessel on the completion of an alteration.

10) For repair methods, the rules of Section R-401 of the National Board Inspection Code shall apply.

11) Alteration methods shall comply with the general requirements of this subsection (a), and with the appropriate ASME Code Section or National Board Inspection Code, as applicable, including any service restrictions.

12) Major replacement of pressure parts, including drums and shells, which are fabricated by welding and for which a Manufacturers Data Report is required by the applicable ASME Code Section shall be fabricated by a manufacturer having an ASME Certificate of Authorization and the appropriate ASME Code Symbol Stamp. The item shall be inspected, stamped with the applicable ASME Code Symbol and the word "PART", and reported on the appropriate Manufacturers Partial Data Report.

13) When a repair or alteration requires removal of that part of a non-ISI boiler or pressure vessel containing the Code stamping, the Authorized Inspector shall, subject to the approval of the Department, witness the making of a facsimile of stamping, the obliteration of the old stamping and the transfer of the stamping to the new part. When the stamping is on a nameplate, the Authorized Inspector is to witness the transfer of the nameplate to the new part. The ASME Code Symbol is not to be restamped.

14) For rerating, the rules of Section R-503 of the National Board Inspection Code shall apply except that "subject to acceptance" shall be read as "forwarded for review and approval". Additionally, the following shall apply:

- A) All requirements in Section R-503 of the National Board Inspection Code and this subsection shall be met

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

to the satisfaction of the Authorized Inspection Agency at the location of the installation.

- B) Revised calculations verifying the new service conditions shall be required from the original manufacturer or, when such calculations cannot be obtained from this source, they may be prepared by an Engineer in accordance with Section R-503(a) of the National Board Inspection Code.

- C) The boiler or pressure vessel shall be pressure tested for the rerated condition as required by subsection (a)(8)(B) above.

- b) All ASME Code Section I "V" stamped, Section III "NW" stamped, and Section VIII "UV" stamped pressure relief valves associated with non-ISI boilers and pressure vessels shall be repaired in accordance with this subsection. If the administrative requirements of this Section cannot be met, attributable to this emergency rulemaking, then the owner may utilize alternative administrative requirements subject to review by the Department following completion of the repair or alteration.

- 1) All pressure relief valves covered by this subsection (b) that are repaired after the effective date of this Part shall be repaired by one of the following organizations:

- A) An owner and those organizations under contract to the owner, provided that:
- i) such repairs are made in accordance with a Quality Assurance Program that meets the requirements of 10 CFR 50 Appendix B and has been approved by the NRC;
 - ii) all portions of the owner's 10 CFR 50 Appendix B Quality Assurance Program, described in subsection (i) above, that are applicable to a repair activity are applied to the repair; and
 - iii) the owner notifies the Department of his intention to apply 10 CFR 50 Appendix B Quality Assurance Program, described in subsection (i) above, to the repair these pressure relief valves.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

AGENCY NOTE: The application of the owner's 10 CFR 50 Appendix B Quality Assurance Program, described in subsections (i) and (ii) above, is subject to review by the Authorized Inspector.

- B) The manufacturer of the valve who is in possession of a valid ASME "V", "NV", or "UV" Certificate of Authorization, provided repairs are within the scope of the organization's Certificate of Authorization and are performed under the organization's Quality Control System or Quality Assurance System, as applicable.
- C) An organization in possession of a valid "VR" Certificate of Authorization issued by the National Board, provided repairs are within the scope of the organization's Certificate of Authorization and are performed under the organization's Quality Control System.
- D) An organization in possession of a valid Certificate of Authorization issued by the Division of Boiler and Pressure Vessel Safety, Office of the State Fire Marshal, to repair pressure relief valves provided repairs are within the scope of the organization's Certificate of Authorization and performed under the organization's accepted Quality Control System.
- 2) Repair of a pressure relief valve is considered to be the replacement or machining of any critical part lapping of seat and disc or any other operation which may affect the flow passage, capacity, function or pressure retaining integrity. Disassembly and reassembly, or adjustments which affect the pressure relief valve function are not considered a repair, but a test confirming the valve's set pressure shall be performed. The initial installation, testing and adjustments of a new pressure relief valve on a non-ISI boiler or pressure vessel are not considered a repair.
- 3) Nameplates
 - A) The rules of Appendix C-VR, Section 9.0 of the National Board Inspection Code shall apply. The exceptions and clarifications of this subsection shall also apply.
 - B) The exception in National Board Inspection Code

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

Appendix C-VR, Section 9.1, shall be as follows. Individuals authorized by the Division of Boiler and Pressure Vessel Safety, Office of the State Fire Marshal, who are properly trained and qualified employees of the owner may make adjustments to the set pressure provided the adjusted settings and the date of the adjustment are recorded on a metal tag secured to the seal wire. All external adjustments shall be resealed showing the identification of the organization making the adjustments.

- C) For owners that act as the valve repair organization under the provisions of subsection (b)(1)(A) above who are not in possession of a valid "VR" Certificate of Authorization issued by the National Board, the requirements for stamping the ASME Code "V", "UV", "NV" or National Board "VR" mark in Section 9.0 of the National Board Inspection Code, Appendix C-VR shall not apply. All other requirements shall be met.
- 4) Performance Testing
 - A) The rules of Appendix C-VR, Section 11.0 of the National Board Inspection Code shall apply, regardless of whether the "VR" stamp will be or has been applied. The exceptions and clarifications of this subsection shall also apply.
 - B) The use of calibrated equipment per Section 8.2.1(M) of the National Board Inspection Code, Appendix C-VR, shall be met in Section 11.3(B)(2) of the National Board Inspection Code, Appendix C-VR.
 - 5) Organizations that repair pressure relief valves under subsections (b)(1)(B) through (b)(1)(D) above may perform field repairs in accordance with the following requirements.
 - A) Qualified technicians in the employ of the repair organization perform such repairs.
 - B) Procedures that address field repairs are contained in the Quality Control System or Quality Assurance System, as applicable, and are maintained.
 - C) All functions affecting the quality of the repaired pressure relief valves are controlled from the

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

location for which the appropriate authorization was issued.

- D) Periodic audits of work carried out in the field are made by quality control personnel of the repair organization to ensure that the requirements of the Quality Control System or Quality Assurance System, as applicable, are met. This audit may include witnessing the test of the field repaired pressure relief valve.

Section 505.2600 Code Case Applications EMERGENCY

- a) The Department shall act on requests to use ASME Code Cases within 30 days of their receipt. The Department shall approve the use of a Code Case if such use is directly applicable to and consistent with the uses authorized by the ASME Code Case.
- b) The Department shall automatically approve the use of Code Cases to non-ISI boilers or pressure vessels in all cases where such use is approved by the NRC and referenced in the nuclear facility's Updated or Final Safety Analysis Report, technical specifications, or other licensing documents. The Department shall not approve such use of Code Cases where the use is disapproved by the NRC.
- c) ASME Code Cases approved by the Department for a particular situation rather than for generic use shall be used only for that situation.

Section 505.2700 Issuance of Permits and Registration of Non-ASME Code Boilers and Pressure Vessels (State Specials) EMERGENCY

- a) For all non-ISI boilers and pressure vessels, the Department shall determine the acceptability of the alternative standards in accordance with this Section.
- b) The Department shall automatically accept alternative construction standards that have been accepted by the NRC and referenced in the nuclear facility's Updated or Final Safety Analysis Report, technical specifications, or other licensing documents.
- c) When an owner contends that a boiler or pressure vessel, other than those covered by subsection (b) above, to be installed subsequent to the effective date of this Part, was not constructed

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

in accordance with ASME Code standards, the owner may request the Department to issue a permit for the installation of a boiler or pressure vessel not constructed in accordance with the applicable ASME Code.

- 1) The owner shall submit the documentation described in this Section to the Department and obtain a special installation permit.
- 2) The owner shall specify the reasons why the boiler or pressure vessel was not constructed in accordance with ASME Code standards. The owner shall also supply the following information to the Department for review and consideration of requests for a special installation permit:
 - A) Full details of design and construction showing equivalency to and departures from the ASME Code, including blueprints and material showing details of the construction;
 - B) Data relating to the physical and chemical properties of all materials used in construction;
 - C) Calculations showing how the MAMP was derived;
 - D) An authentic test record for all non-ASME Code materials used in construction; and
 - E) Other data as the owner deems relevant or as the Department may request in order to establish that the boiler or pressure vessel will be capable of operating as safely as one built to ASME Code standards.
- 3) The Department may issue special installation permits to a class of boilers or pressure vessels meeting the above criteria when it deems that the public interest would be best served by application of the class of boilers or pressure vessels rather than individual case-by-case determination.
- 4) The Department may, as a condition to issuance of a special installation permit, require the installation of safety features or prescribed operating procedures for boilers or pressure vessels. The Department will use relevant safety data in determining the need for installation of safety features or operating features.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

- 5) If the Department acts to deny a request for special permit, it shall take action under Section 505.84.
- d) Owners shall meet the requirements of Section 505.170 in all cases involving use of alternative standards for the construction of non-ISI boilers or pressure vessels.

Section 505.2800 Authorized Inspectors
EMERGENCY

In order to perform the duties of an Authorized Inspector for non-ISI boilers or pressure vessels at nuclear facilities within the State an individual shall meet the requirements of Section 505.180.

Section 505.2900 Authorized Inspection Agencies
EMERGENCY

- a) Authorized Inspection Agencies that are insuring a non-ISI boiler or pressure vessel shall immediately notify the Department when such insurance is canceled, not renewed, suspended or otherwise made ineffective because of unsafe conditions.
- b) Organizations seeking to provide inspection services to the requirements of the National Board Inspection Code or the ASME Code, except for Section III and Section XI shall be subject to the requirements of Section 505.190.
- c) The request for recognition submitted in Section 505.190(b) shall also contain documentation demonstrating that the organization meets the ASME Code or the National Board Inspection Code requirements for Authorized Inspection Agencies, if any, for the scope of inspection activities.
- d) Organizations that are providing inspection services at nuclear facilities on the effective date of this Part may be reviewed by the Department, after one year following the effective date of this Part. Such reviews shall be for the purpose of verifying that the organization is, in compliance with applicable ASME Code Sections or National Board Inspection Code, as applicable, including qualification and duty requirements for Authorized Inspection Agencies contained therein.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF EMERGENCY RULES

- e) An organization that is recognized by the Department under Section 505.190(c) as an Authorized Inspection Agency may be reviewed by the Department either prior or subsequent to recognition. Such reviews shall be for the purpose of verifying that the organization is in compliance with applicable ASME Code Sections or National Board Inspection Code, as applicable including qualification and duty requirements for Authorized Inspection Agencies contained therein.
- f) The Department shall give 15 days written notice before any reviews are performed under this Section. Reviews shall be performed at the locations where control of Authorized Inspectors occurs or at the organization's home office.

DEPARTMENT OF AGRICULTURE

NOTICE OF PEREMPTORY AMENDMENTS

- 1) Heading of Part: Meat and Poultry Inspection Act
- 2) Code Citation: 8 Ill. Adm. Code 125
- 3) Section Numbers: Peremptory Action:
125.100 Amended
125.270 Amended
- 4) Reference to the Specific State or Federal Court Order, Federal Rule or Statute which requires this Peremptory Rulemaking: The Meat and Poultry Inspection Act (Ill. Rev. Stat. 1991, ch. 56 1/2, par. 316) [225 ILCS 650/16]; the Federal Meat Inspection Act (21 U.S.C.A. 661); the Federal Poultry Inspection Act (21 U.S.C.A. 454); 58 FR 41138 (1993).
- 5) Statutory Authority: The Meat and Poultry Inspection Act (Ill. Rev. Stat. 1991, ch. 56 1/2, par. 316) [225 ILCS 650/16].

6) Effective Date: September 7, 1993

7) A Complete Description of the Subjects and Issues Involved:

In order to maintain an "equal to" status with the federal meat and poultry inspection programs as required by the Federal Meat Inspection Act, the Federal Poultry Inspection Act, and in compliance with Section 16 of The Meat and Poultry Inspection Act, changes in the federal rules relative to meat inspection are hereby adopted.

The Food Safety and Inspection Service has proposed rules amending the Federal Meat Inspection Regulations, specifically Sections 381.23 and 320.1(b)(7). These proposed rules provide for the safe processing and handling and informative labeling of heat-processed (fully-cooked, partially-cooked, and char-marked) uncured meat patties to assist in assuring that such products are wholesome and not adulterated or mislabeled when distributed to consumers.

8) Does this rulemaking contain an automatic repeal date? No

9) Date Filed in Agency's Principal Office: September 1, 1993

10) This rule is in compliance with Section 5.03 of the Illinois Administrative Procedure Act.

11) Are there any proposed amendments pending to this Part? No

DEPARTMENT OF AGRICULTURE

NOTICE OF PEREMPTORY AMENDMENTS

- 12) Statement of Statewide Policy Objectives: Rulemaking does not affect units of local governments.
- 13) Information and questions regarding this adopted amendment shall be directed to:
Name: Debbie Wakefield
Address: Illinois Department of Agriculture
State Fairgrounds, Springfield,
Illinois 62794-9281
Telephone: 217/782-2172

The full text of the Peremptory amendment begins on the next page:

DEPARTMENT OF AGRICULTURE

NOTICE OF PEREMPTORY AMENDMENT(S)

TITLE 8: AGRICULTURE AND ANIMALS
CHAPTER I: DEPARTMENT OF AGRICULTURE
SUBCHAPTER C: MEAT AND POULTRY INSPECTION ACT

PART 125
MEAT AND POULTRY INSPECTION ACT

SUBPART A: GENERAL PROVISIONS FOR BOTH MEAT AND/OR POULTRY INSPECTION

Section	
125.10	Definitions
125.20	Incorporation by Reference of Federal Rules
125.30	Application for License; Approval
125.40	Official Number
125.50	Inspections; Suspension or Revocation of License
125.60	Administrative Hearings; Appeals
125.70	Assignment and Authority of Program Employees
125.80	Schedule of Operations; Overtime
125.90	Official Marks of Inspection, Devices and Certificates
125.100	Records and Reports
125.110	Exemptions
125.120	Disposal of Dead Animals and Poultry
125.130	Reportable Animal and Poultry Diseases
125.140	Detention; Seizure; Condemnation

SUBPART B: MEAT INSPECTION

Section	Livestock and Establishments	Meat Products	Entering	Official
125.150				
125.160	Equine and Equine Products			
125.170	Facilities for Inspection			
125.180	Sanitation			
125.190	Ante-Mortem Inspection			
125.200	Post-Mortem Inspection			
125.210	Disposal of Diseased or Humane Slaughter of Animals	or Otherwise Adulterated Carcasses and Parts		
125.220				
125.230	Handling and Disposal of Carcasses at Official Establishment	or Other Inedible		
125.240	Rendering or Other Disposal of Carcasses and Parts Passed for Cooking			
125.250	Marking Products and Their Containers			
125.260	Labeling, Marking and Containers			
125.270	Entry into Official Establishment; Reinspection and Preparation of Product			
125.280	Meat Definitions and Standards of Identity or Composition			

DEPARTMENT OF AGRICULTURE

NOTICE OF PEREMPTORY AMENDMENT(S)

Transportation
Imported Products
Special Services Relating to Meat and Other Products
Exotic Animal Inspection

SUBPART C: POULTRY INSPECTION

Section	
125.310	Application of Inspection
125.320	Facilities for Inspection
125.330	Sanitation
125.340	Operating Procedures
125.350	Ante-Mortem Inspection
125.360	Post-Mortem Inspection; Disposition of Carcasses and Parts
125.370	Handling and Disposal of Condemned or Inedible Products at Official Establishments
125.380	Labeling and Containers
125.390	Entry of Articles Into Official Establishments; Processing Inspection and Other Reinspections; Processing Requirements
125.400	Definitions and Standards of Identity or Composition
125.410	Transportation; Sale of Poultry or Poultry Products

AUTHORITY: Implementing and authorized by The Meat and Poultry Inspection Act (Ill. Rev. Stat. 1991, ch. 56 1/2, par. 301 et seq.) [225 ILCS 650/16] and The Civil Administrative Code of Illinois (Ill. Rev. Stat. 1991, ch. 127, par. 16) [20 ILCS 5/16].

SOURCE: Adopted at 9 Ill. Reg. 1782, effective January 24, 1985; peremptory amendment at 9 Ill. Reg. 2337, effective January 28, 1985; peremptory amendment at 9 Ill. Reg. 2980, effective February 20, 1985; peremptory amendment at 9 Ill. Reg. 4856, effective April 1, 1985; peremptory amendment at 9 Ill. Reg. 9240, effective June 5, 1985; peremptory amendment at 9 Ill. Reg. 10102, effective June 13, 1985; peremptory amendment at 9 Ill. Reg. 11673, effective July 17, 1985; peremptory amendment at 9 Ill. Reg. 13748, effective August 23, 1985; peremptory amendment at 9 Ill. Reg. 15575, effective October 2, 1985; peremptory amendment at 9 Ill. Reg. 19759, effective December 5, 1985; peremptory amendment at 10 Ill. Reg. 447, effective December 23, 1985; peremptory amendment at 10 Ill. Reg. 1307, effective January 7, 1986; peremptory amendment at 10 Ill. Reg. 3318, effective January 24, 1986; peremptory amendment at 10 Ill. Reg. 3880, effective February 7, 1986; peremptory amendment at 10 Ill. Reg. 3880, effective February 7, 1986; peremptory amendment at 10 Ill. Reg. 11478, effective June 25, 1986; peremptory amendment at 10 Ill. Reg. 14858, effective August 22, 1986; peremptory amendment at 10 Ill. Reg. 15305, effective September 10, 1986; peremptory amendment at 10 Ill. Reg. 16743, effective September 19, 1986; peremptory amendment at 10 Ill. Reg.

DEPARTMENT OF AGRICULTURE

DEPARTMENT OF AGRICULTURE

NOTICE OF PEREMPTORY AMENDMENT(S)

NOTICE OF PEREMPTORY AMENDMENT(S)

18203, effective October 15, 1986; peremptory amendment at 10 Ill. Reg. 19818, effective November 12, 1986; peremptory amendment at 11 Ill. Reg. 1696, effective January 5, 1987; peremptory amendment at 11 Ill. Reg. 2930, effective January 23, 1987; peremptory amendment at 11 Ill. Reg. 9645, effective April 29, 1987; peremptory amendment at 11 Ill. Reg. 10321, effective May 15, 1987; peremptory amendment at 11 Ill. Reg. 11184, effective June 5, 1987; peremptory amendment at 11 Ill. Reg. 14830, effective August 25, 1987; peremptory amendment at 11 Ill. Reg. 18799, effective November 3, 1987; peremptory amendment at 11 Ill. Reg. 19805, effective November 19, 1987; peremptory amendment at 12 Ill. Reg. 2154, effective January 6, 1988; amended at 12 Ill. Reg. 3417, effective January 22, 1988; peremptory amendment at 12 Ill. Reg. 4879, effective February 25, 1988; peremptory amendment at 12 Ill. Reg. 6313, effective March 21, 1988; peremptory amendment at 12 Ill. Reg. 6819, effective March 29, 1988; peremptory amendment at 12 Ill. Reg. 13621, effective August 8, 1988; peremptory amendment at 12 Ill. Reg. 19116, effective November 1, 1988; peremptory amendment at 12 Ill. Reg. 20894, effective December 21, 1988; peremptory amendment at 13 Ill. Reg. 228, effective January 11, 1989; peremptory amendment at 13 Ill. Reg. 2160, effective February 13, 1989; amended at 13 Ill. Reg. 3696, effective March 13, 1989; peremptory amendment at 13 Ill. Reg. 15853, effective October 5, 1989; peremptory amendment at 13 Ill. Reg. 16838, effective October 11, 1989; peremptory amendment at 13 Ill. Reg. 17495, effective January 18, 1990; amended at 14 Ill. Reg. 3424, effective February 26, 1990; peremptory amendment at 14 Ill. Reg. 4953, effective March 23, 1990; peremptory amendment at 14 Ill. Reg. 11401, effective July 6, 1990; peremptory amendment at 14 Ill. Reg. 13355, effective August 20, 1990; peremptory amendment at 14 Ill. Reg. 16064, effective September 24, 1990; peremptory amendment at 14 Ill. Reg. 21060, effective May 29, 1991; peremptory amendment at 15 Ill. Reg. 620, effective January 2, 1991; peremptory amendment withdrawn at 15 Ill. Reg. 1574, effective January 2, 1991; peremptory amendment at 15 Ill. Reg. 3117, effective September 3, 1991; peremptory amendment at 15 Ill. Reg. 8714, effective May 29, 1991; amended at 15 Ill. Reg. 8801, effective June 7, 1991; peremptory amendment at 15 Ill. Reg. 13976, effective September 20, 1991; peremptory amendment at 16 Ill. Reg. 1899, effective March 2, 1992; amended at 16 Ill. Reg. 8349, effective May 26, 1992; peremptory amendment at 16 Ill. Reg. 11687, effective July 10, 1992; peremptory amendment at 16 Ill. Reg. 11963, effective July 22, 1992; peremptory amendment at 16 Ill. Reg. 12234, effective July 24, 1992; peremptory amendment at 16 Ill. Reg. 16337, effective October 19, 1992; peremptory amendment at 16 Ill. Reg. 17165, effective October 21, 1992; peremptory amendment at 17 Ill. Reg. 2063, effective February 12, 1993; peremptory amendment at 17 Ill. Reg. 15725, effective September 7, 1993.

Section 125.100 Records and Reports

- a) The Department incorporates by reference 9 CFR 320.1(b), 320.6(a), 320.7, 381.175(b), 381.175(b)(4), 381.180(a) and 381.181 (1990); 57 FR 27870, effective July 22, 1992, 57 FR 43588, effective October 21, 1992; 58 FR 41138, effective September 1, 1993.
- b) Access to the establishment, its premises, records and inventories shall be provided to the Department in accordance with Section 14 of the Act and Section 125.70.
- c) Each person who is required to be licensed in accordance with Section 3 of the Act shall keep records as stated in the incorporated language of 9 CFR 320.1(b) and 381.175(b), except that for custom slaughtering and custom processing transactions, the recordkeeping requirements shall be those set forth in Section 5(B)(2)(f) of the Act. Records shall be retained for 5 years after December 31 of the year in which the transaction to which the record relates has occurred. If a record must be retained for longer than 5 years because of an on-going investigation or litigation, the Department shall notify the licensee in writing as to which record is to be retained, the reasons for such retention and the retention period. The Department shall consider when determining the retention period the court date, if known, or the time needed to conclude the investigation (e.g., considering the type of disease being investigated, the number of animals involved, and laboratory testing procedures, if applicable).
- d) The licensee of the official establishment shall maintain such records at the establishment. In the case of a broker, the records shall be maintained at the office listed on the application for license.
- e) The Department shall request a licensee to submit an evaluation of the inspection program or of the inspector's performance when the Department is conducting a review of the effectiveness of the Meat and Poultry Inspection Program or when a complaint on the inspector's performance has been received.

(Source: Peremptory amendment at 17 Ill. Reg. 15725, effective September 7, 1993)

DEPARTMENT OF AGRICULTURE

NOTICE OF PEREMPTORY AMENDMENT(S)

SUBPART A: GENERAL PROVISIONS FOR BOTH MEAT AND/OR
POULTRY INSPECTION

Section 125.270 Entry into Official Establishment; Reinspection
and Preparation of Product

a) The Department incorporates by reference 9 CFR 318.1(c) through 318.7, 318.9 through 318.10, 318.14 through 318.20, 318.22, 318.23, 318.300 through 318.311 (1990; 54 FR 43041, effective January 18, 1990; 55 FR 7294, effective August 28, 1990; 55 FR 34678, effective September 24, 1990, as amended by 55 FR 49991, December 4, 1990; 57 FR 27870, effective July 22, 1992; 57 FR 42885, effective October 19, 1992; 58 FR 4067, effective February 12, 1993; 58 FR 41138, effective September 1, 1993).

b) No meat or meat product shall be brought into an official establishment unless it is inspected or has been prepared in an official establishment or in a federally licensed establishment and is identified by an official inspection legend as set forth in Section 125.90, a federal inspection legend, or is exempt from inspection as stated in Section 125.110. Meat and meat products received in an official establishment during the absence of the inspector shall be identified as set forth in Section 125.200 and, unless exempt from inspection, shall not be used or prepared until they have been reinspected. Any meat and meat product originally prepared at any official establishment may not be returned to any part of such establishment other than the receiving area until it has been reinspected by the inspector and passed. Wild game carcasses shall comply with Section 5(B)(4) of the Act. The official establishment shall maintain an inventory of non-meat items (e.g., spices, preservatives) which are received at the official establishment. Any product that is brought on the premises of an official establishment contrary to the provisions of this Section shall be removed immediately from such establishment by the operator of the establishment.

c) Reinspections of meat and/or meat products within the official establishment shall be performed through the use of a random digit table.

d) Docks and receiving rooms for meat and/or meat products or other articles used by the establishment in the preparation of meat products entering an official establishment shall be approved by the inspector if the

DEPARTMENT OF AGRICULTURE

NOTICE OF PEREMPTORY AMENDMENT(S)

location of such docks or receiving rooms will not permit such product or article to pass through rooms containing inspected and passed products.

e) The manner of defrosting frozen products and methods of treating to preserve products shall be in accordance with procedures as set forth in the "Meat and Poultry Inspection Manual" as adopted in Section 125.20.

f) Casings or weasand shall be inspected and passed if it is in compliance with the specific provisions as stated in 9 CFR 318.5(1) for passage of such articles.

g) The Department does not approve new substances to be used on meat or in meat products, their uses or the levels of use of an approved substance. Such substances will be permitted to be used and artificial flavorings may be used if they do not adulterate the meat and/or meat product in accordance with Section 2.11 of the Act and are in compliance with the provisions of this Section.

h) References to exemptions from slaughter and custom slaughter shall mean those exemptions set forth in Section 125.110.

i) Reference to 9 CFR 327 are not applicable to the Department in its enforcement of the rules of this Part. References to the federal Poultry Inspection Act, Section 403 of the Act, Section 7 of the Act, 9 CFR 303, and paragraph 23(a) of the Act shall be interpreted to mean in accordance with The Meat and Poultry Inspection Act and the rules of this Part.

j) The Department does not approve thermometers for use in smokehouses, dry rooms and other compartments that are used in the treatment of pork.

k) Disinfectants shall be those as set forth in Section 125.180.

l) Adequate vacuum shall be determined through the use of vacuum gauges.

m) Canned products which may be processed without steam-pressure cooking shall be those products as stated in the "Meat and Poultry Inspection Manual" as adopted by the Department in Section 125.20.

DEPARTMENT OF AGRICULTURE

NOTICE OF PEREMPTORY AMENDMENT(S)

- n) The inspector shall permit lots of canned product to be shipped from the official establishment prior to the completion of the incubation period on the representative samples in accordance with the specific provisions in 9 CFR 318.309.
- o) The standards and procedures for determining when ingredients of finished products are in compliance with this Section shall be as set forth in the "Meat and Poultry Inspection Manual" as adopted by the Department in Section 125.20.

(Source: Peremptory amendment at 17 Ill. Reg. 15725, effective September 7, 1993)

JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLY

SECOND NOTICES RECEIVED

The following second notices were received by the Joint Committee on Administrative Rules during the period of September 8, 1993 through September 14, 1993, and have been scheduled for review by the Committee at its October 12, 1993 meeting. Other items not contained in this published list may also be considered. Members of the public wishing to express their views with respect to a rule should submit written comments to the Committee at the following address: Joint Committee on Administrative Rules, 700 Stratton Office Bldg., Springfield IL 62706.

Second Notice Expires	Agency and Rule	Start of First Notice	JCAR Meeting
10/23/93	Illinois Racing Board, Stewards (11 Ill Adm Code 1402)	7/23/93 17 Ill Reg 11372	10/12/93
10/23/93	Illinois Racing Board, Licensing (11 Ill Adm Code 502)	7/23/93 17 Ill Reg 11367	10/12/93
10/23/93	Department of Rehabilitation Services, Criteria for the Evaluation of Programs of Services in Community Rehabilitation Programs (89 Ill Adm Code 530)	7/23/93 17 Ill Reg 11394	10/12/93
10/23/93	Department of Rehabilitation Services, Advisory Councils (89 Ill Adm Code 515)	7/23/93 17 Ill Reg 11378	10/12/93
10/23/93	Department of Rehabilitation Services, Repeal of Training Services (89 Ill Adm Code 592)	7/23/93 17 Ill Reg 11422	10/12/93
10/23/93	Department of Rehabilitation Services, Assessment for Determining Eligibility and Rehabilitation Needs (89 Ill Adm Code 553)	7/23/93 17 Ill Reg 11384	10/12/93
10/23/93	Department of Rehabilitation Services, Impartial Hearing Officer Standards (89 Ill Adm Code 1177)	7/23/93 17 Ill Reg 11400	10/12/93

ILLINOIS REGISTER

JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLYSECOND NOTICES RECEIVED
(Page 2)

<u>Second Notice Expires</u>	<u>Agency and Rule</u>	<u>Start of First Notice</u>	<u>JCAR Meeting</u>
10/23/93	<u>Department of Rehabilitation Services, Client Financial Participation (89 III Adm Code 562)</u>	7/23/93 17 III Reg 11388	10/12/93
10/23/93	<u>Department of Rehabilitation Services, Application (89 III Adm Code 557)</u>	7/23/93 17 III Reg 11382	10/12/93
10/23/93	<u>Department of Rehabilitation Services, Individualized Written Rehabilitation Program (IWRP) (89 III Adm Code 572)</u>	7/23/93 17 III Reg 11402	10/12/93
10/23/93	<u>Department of Rehabilitation Services, Comparable Benefits (89 III Adm Code 567)</u>	7/23/93 17 III Reg 11392	10/12/93
10/23/93	<u>Department of Rehabilitation Services, Services (89 III Adm Code 590)</u>	7/23/93 17 III Reg 11416	10/12/93
10/23/93	<u>Department of Rehabilitation Services, Repeal of Medical, Psychological, and Related Services (89 III Adm Code 587)</u>	7/23/93 17 III Reg 11406	10/12/93
10/23/93	<u>Department of Rehabilitation Services, Repeal of Maintenance (89 III Adm Code 602)</u>	7/23/93 17 III Reg 11404	10/12/93
10/23/93	<u>Department of Rehabilitation Services, Appeals and Hearings (89 III Adm Code 510)</u>	7/23/93 17 III Reg 11380	10/12/93

ILLINOIS REGISTER

JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLYSECOND NOTICES RECEIVED
(Page 3)

<u>Second Notice Expires</u>	<u>Agency and Rule</u>	<u>Start of First Notice</u>	<u>JCAR Meeting</u>
10/23/93	<u>Department of Rehabilitation Services, Illinois Center for Rehabilitation and Education/Community Residential Services for the Blind and Visually Impaired (89 III Adm Code 730)</u>	7/23/93 17 III Reg 11398	10/12/93
10/23/93	<u>Department of Rehabilitation Services, Repeal of Secondary Transitional Experience (89 III Adm Code 657)</u>	7/23/93 17 III Reg 11414	10/12/93
10/23/93	<u>Department of Rehabilitation Services, Repeal of Other Services (89 III Adm Code 607)</u>	7/23/93 17 III Reg 11408	10/12/93
10/23/93	<u>Department of Rehabilitation Services, Repeal of Post-Employment Services (89 III Adm Code 622)</u>	7/23/93 17 III Reg 11412	10/12/93
10/23/93	<u>Department of Rehabilitation Services, Closure (89 III Adm Code 617)</u>	7/23/93 17 III Reg 11390	10/12/93
10/23/93	<u>Department of Rehabilitation Services, Repeal of Placement (89 III Adm Code 612)</u>	7/23/93 17 III Reg 11410	10/12/93
10/23/93	<u>Department of Rehabilitation Services, Tools, Equipment, Supplies and Initial Stock (89 III Adm Code 597)</u>	7/23/93 17 III Reg 11420	10/12/93
10/23/93	<u>Department of Rehabilitation Services, Repeal of Auxiliary Aids (89 III Adm Code 540)</u>	7/23/93 17 III Reg 11386	10/12/93

JOINT COMMITTEE ON ADMINISTRATIVE RULES
ILLINOIS GENERAL ASSEMBLY

SECOND NOTICES RECEIVED

(Page 4)

Second Notice <u>Expires</u>	10/23/93	Agency and Rule	Department of Rehabilitation Services, Repeal of Eligibility (89 Ill Adm Code 552)	Start of First Notice	7/23/93 17 Ill Reg 11396	JCAR <u>Meeting</u>	10/12/93
------------------------------------	----------	-----------------	--	-----------------------------	--------------------------------	------------------------	----------

EXECUTIVE ORDER

93-6

FAMILY PRESERVATION TASK FORCE

Whereas, Senate Resolution No. 332 of the Eighty-eighth General Assembly recognizes the need to re-examine both the "Family First" program and the present system of delivering family preservation services within the State of Illinois by establishing a Family Preservation Task Force for that purpose; and

Whereas, I concur with establishment of a Family Preservation Task Force, but believe expansion of its role and membership is essential to its success.

Therefore, pursuant to my authority created in me by Article V, Section 11 of the Illinois Constitution, I hereby order that a Family Preservation Task Force be and hereby is created. This Task Force shall be composed of 20 members who shall be as follows:

The Director of the Department of Children and Family Services, or his or her designee, who shall chair the Task Force;
Four legislative members, one appointed by each of the following: the President of the Senate, the Minority Leader of the Senate, the Speaker of the House and the Minority Leader of the House;

The Cook County State's Attorney, or his or her designee;
The Presiding Judge of the Cook County Juvenile Court, or his or her designee;

The Cook County Public Guardian, or his or her designee;

The Cook County Public Defender, or his or her designee;

A downstate judge with experience in juvenile court matters;

A downstate State's Attorney with experience in juvenile court matters;

One representative of the Child Welfare Advisory Committee's subcommittee on Family Preservation;

One representative of Voices for Illinois Children;

One licensed social worker as representative of the Illinois Chapter of the National Association of Social Workers;

One representative of the Illinois Association of Family Service Agencies;

One representative of the Child Care Association;

One representative of the Catholic Conference; and

Three additional members appointed by the Governor of the State of Illinois.

Staff services and resources shall be provided to the Task Force, as needed, by the Department of Children and Family Services.

The members of the Task Force shall study available information on Family Preservation in Illinois and in other

states, and shall develop and recommend specific programming changes, legislative changes, and accountability standards for Family Preservation Services designed to assure that children will be maintained safely in or returned to their homes in a manner consistent with the best interests of the child and acceptable child welfare practices.

The Task Force shall, as it deems necessary, convene appropriate public hearings.

The Task Force shall submit a report of its findings and recommendations to the Governor and the General Assembly by January 1, 1994.

This Executive Order Number 6 (1993) shall be effective upon filing with the Secretary of State.

Issued by the Governor September 10, 1993.

Filed with the Secretary of State September 10, 1993.

PROCLAMATION

93-406

CERTIFIED PROFESSIONAL SECRETARIES MONTH

Whereas, the Certified Professional Secretaries (CPS) rating is one of the highest honors attainable in the secretarial profession. Professionals in government, business, and industry recognize that secretaries who have such a rating can be of valuable service to them; and

Whereas, to obtain the certification, secretaries must satisfactorily demonstrate their judgment, understanding, and administrative capabilities in an examination administered by the Institute for Certifying Secretaries; and

Whereas, certified secretaries possess knowledge and skill in business relationships, business and public policy, economics, management, communication, decision-making, financial analysis, and office procedures;

Whereas, the CPS rating has been awarded to 40,995 secretaries in our nation, 1,974 of whom live in Illinois. Our state ranks fourth in the United States in the number of CPS-rated individuals;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim October 1993 as CERTIFIED PROFESSIONAL SECRETARIES MONTH in Illinois and extend congratulations to secretaries who have earned this distinguished rating and to those striving for the honor.

Issued by the Governor September 1, 1993.

Filed with the Secretary of State September 10, 1993.

93-407

CRIME PREVENTION MONTH

Whereas, local law enforcement personnel in Illinois have been in the forefront of efforts to prevent crime and deter illegal drug abuse, which have reached epidemic proportions; and

Whereas, police cannot be everywhere and need help to prevent crime, especially drug-related crime, and citizens can take steps to protect themselves, their property, and their neighborhoods; and

Whereas, Illinois citizens and law enforcement personnel working together have been successful in preventing crime and reducing drug abuse in their communities; and

Whereas, this year's activities focus on the needs of our youngest citizens. A guide entitled "Sending Kids Into a Safer World," will be distributed to help kids, the single most victimized portion of our population; and

Whereas, this year, Scruff, the nephew of McGruff the Crime Dog will be introduced; and

Whereas, crime prevention merits the participation of citizens, law enforcement personnel, businesses, media representatives, civic groups, and public officials;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim October 1993 as CRIME PREVENTION MONTH in Illinois in conjunction with the national observance, and I urge everyone to make crime prevention their business and join with McGruff and Scruff in commemorating this month.

Issued by the Governor September 1, 1993.

Filed with the Secretary of State September 10, 1993.

93-408

GERMAN-AMERICAN DAY

Whereas, the first German immigrants arrived in the United States October 1683; and

Whereas, today more than 60 million Americans trace at least a part of their ancestry to Germany. German-Americans account for the largest ethnic group in our state; and

Whereas, the sons and daughters of Germany have made numerous contributions to our nation and our state; and

Whereas, the United German-American Societies of Greater Chicago are sponsoring a number of festivities to celebrate Illinois' German-American heritage, including the 28th annual General Von Stueben Parade September 18 and the annual German-American fest September 17-19;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim October 6, 1993, as GERMAN-AMERICAN DAY in Illinois and encourage all Illinoisans to be cognizant of this annual celebration.

Issued by the Governor September 1, 1993.

Filed with the Secretary of State September 10, 1993.

93-409

LIONS CANDY DAY

Whereas, Lions of Illinois have spearheaded efforts to protect our citizens against the ravages of blindness and deafness for many years; and

Whereas, presently, 28,000 Illinois citizens are blind and 106,000 Illinois residents are deaf or hearing-impaired; and

Whereas, Lions have expended millions of dollars in recent years for an eye donor registry, low vision clinics and hearing screenings, camping programs, hearing aid and eyeglass collections, and hundreds of other local programs; and

Whereas, on Friday, October 8, 1993, Lions are observing Candy Day, their primary fund-raising event of the year; Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim October 8, 1993, as LIONS CANDY DAY in Illinois, in recognition and support of the organization's many worthwhile endeavors.

Issued by the Governor September 1, 1993.

Filed with the Secretary of State September 10, 1993.

93-410

OSTEOPATHIC MEDICINE WEEK

Whereas, for more than 100 years, the osteopathic medical profession has been dedicated to preserving good health for all Americans; and

Whereas, osteopathic health care is a distinctive branch of mainstream medical care, and Illinois Doctors of Osteopathy are fully licensed physicians who stress the unity of all body systems and emphasize the importance of the musculoskeletal system; and

Whereas, osteopathic physicians and hospitals are concerned with meeting the health needs of the whole person and the whole family and offer preventive medical services; and

Whereas, we should recognize the need for the latest technology and for caring physicians committed to family practice, modern health care, and the entire person in treating illnesses;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim October 10-16, 1993 as OSTEOPATHIC MEDICINE WEEK in Illinois, in accordance with the national observance.

Issued by the Governor September 1, 1993.

Filed with the Secretary of State September 10, 1993.

93-411

AMIGOS DE SER DAY

Whereas, SER Jobs for Progress, Inc. is a national organization that focuses on the unemployment and training needs of Hispanic Americans and has been recognized throughout the nation and by Congress as "a community-based organization of demonstrated effectiveness"; and

Whereas, since 1987, SER (Service, Employment, and Redevelopment) has provided employment and training services to thousands of individuals in our state; and

Whereas, a group of our nation's major corporations has forged a new partnership with SER to provide private assistance in the employment, education, and training process; and

Whereas, the Amigos de SER Business Recognition Luncheon will be held September 24;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim September 24, 1993, as AMIGOS DE SER DAY in Illinois.

Issued by the Governor September 3, 1993.

Filed with the Secretary of State September 10, 1993.

93-412

MEXICAN INDEPENDENCE WEEK

Whereas, the Sociedad Civica Mexicana de Illinois, Inc. is a not-for-profit organization that seeks to perpetuate the customs and traditions of Mexican culture and promote goodwill and understanding among all Illinoisans; and

Whereas, the Sociedad Civica Mexicana de Illinois, Inc. has established a fund to grant \$1,000 scholarships to Latino students; and

Whereas, the Sociedad Civica Mexicana de Illinois, Inc. has sponsored the Fiestas Patrias since 1969; and

Whereas, President Lic. Carlos Salinas de Gortari will send his official representative to crown the queen of Mexican festivities at the Banquete Azteca; and

Whereas, 1993 marks the 183rd anniversary of Mexico's independence;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim September 10-15, 1993, as Mexican Independence Week in Illinois.

Issued by the Governor September 3, 1993.

Filed with the Secretary of State September 10, 1993.

93-413

D.A.R.E DAY

Whereas, D.A.R.E. (Drug Abuse Resistance Education) is the largest drug abuse prevention education program in the United States and has now been taught to more than 25 million children in kindergarten through the 12th grade; and

Whereas, D.A.R.E. is a cooperative effort among law enforcement officials, the educational system, and the community, which provides students accurate information about alcohol and drugs, enhances students' decision-making skills, informs them of the consequences of their behavior, and builds students' self-esteem while encouraging them to resist peer pressure; and

Whereas, D.A.R.E. provides parents important information and detailed guidance to further their children's development and to reinforce their decisions to lead drug-free lives; and

Whereas, D.A.R.E. is now taught in Illinois by more than 550 experienced and accomplished D.A.R.E. officers in over 1,700 classrooms, reaching some 126,000 fifth and sixth grade students annually; and

Whereas, D.A.R.E. is celebrating its 10th anniversary this year;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim September 9, 1993, as D.A.R.E. DAY in Illinois in recognition of the significant role this programs plays in the well-being of our future generations.

Issued by the Governor September 7, 1993.

Filed with the Secretary of State September 10, 1993.

93-414

DEAF AWARENESS WEEK

Whereas, there are more than 85,000 deaf or hearing impaired people in Illinois; and

Whereas, Illinois has been a leader in promoting equal educational and employment opportunities to ensure that deaf and hearing impaired people enjoy full rights of citizenship; and

Whereas, the State of Illinois employs more than 550 people with some level of hearing impairment and is the first state in the nation to provide TTY pay-phones at interstate rest areas; and

Whereas, the Illinois School for the Deaf has been preparing deaf and hearing impaired youngsters to live productive lives for 154 years; and

Whereas, the Americans with Disabilities Act requires all televisions manufactured after July 1993 with 13-inch or larger screens to contain a microchip to provide closed captioning for those who have hearing impairments;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim September 19-26, 1993, as DEAF AWARENESS WEEK in Illinois, in conjunction with the observance by the World Federation of the Deaf.

Issued by the Governor September 7, 1993.

Filed with the Secretary of State September 10, 1993.

93-415 EMPLOYMENT EQUITY WEEK

Whereas, the National Institute for Employment Equity (NIFEE) is holding its 11th annual Training Symposium in Chicago September 15-18, and its theme is "Diversity: Future Directions for the 21st Century"; and

Whereas, the national organization works to ensure that every possible effort is being made to provide equal opportunities for all persons to engage in gainful employment, concentrating on those groups of people who have experienced employment discrimination for reason of race, ethnic origin, color, religion, sex, handicap, or age; and

Whereas, the organization is made up of practitioners in the field of equal employment opportunity, labor relations, personnel training, contract compliance, human resources, recruitment, and others interested in furthering the cause of affirmative action or equal opportunity work in the public or private sector;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim September 12-18, 1993, as EMPLOYMENT EQUITY WEEK in Illinois.

Issued by the Governor September 7, 1993.

Filed with the Secretary of State September 10, 1993.

93-416

HELP RETARDED CITIZENS DAYS

Whereas, members of the Illinois State Council of the Knights of Columbus will conduct their 25th annual fund drive October 22-23 to benefit our mentally retarded citizens. Last fall, the Knights raised more than 1.75 million dollars, which were distributed to more than 300 organizations devoted to assisting individuals with mental handicaps; and

Whereas, the Illinois State Council of the Knights of Columbus has provided funds and personal assistance to allow youngsters to participate in the Special Olympics program; and

Whereas, the Illinois State Council has provided more than 2.5 million dollars to build or reconstruct more than twenty homes for the mentally retarded in all six Diocese of Illinois; and

Whereas, since the Illinois State Council of the Knights of Columbus initiated this program, 43 other states have activated similar campaigns to provide much needed financial assistance for the mentally retarded;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim October 22-23, 1993, as HELP RETARDED CITIZENS DAYS in Illinois and commend the Knights of Columbus for its generous efforts.

Issued by the Governor September 7, 1993.

Filed with the Secretary of State September 10, 1993.

93-417
ITALIAN HERITAGE MONTH

Whereas, Christopher Columbus and other distinguished Italians have played a significant role in the growth of civilization; and

Whereas, the strong traditions and rich culture of our Italian-American citizens are recognized by many Americans; and

Whereas, Italian-Americans have contributed greatly to Illinois' arts, politics, sports, and socioeconomic life; and

Whereas, in October, the Joint Civic Committee of Italian Americans (JCCIA) will celebrate Italian Heritage Month with a variety of activities, including a parade on October 12. This year's parade theme is "1893 World's Fair Columbian Exposition Centennial Celebration";

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim October 1993 as ITALIAN HERITAGE MONTH in Illinois.

Issued by the Governor September 7, 1993.

Filed with the Secretary of State September 10, 1993.

93-418

TRAVELERS WITH DISABILITIES AWARENESS WEEK

Whereas, the Americans with Disabilities Act (ADA) protects the civil rights of individuals with disabilities and guarantees them equal opportunities in employment, public accommodations, transportation, state and local government services, and telecommunications; and

Whereas, an increasing number of people with disabilities are traveling, touring, and enjoying hospitality services and leisure activities; and

Whereas, the State of Illinois seeks to promote respect and equal opportunities for all people;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim November 28-December 4, 1993, as TRAVELERS WITH DISABILITIES AWARENESS WEEK in Illinois and encourage all citizens involved in the travel industry to respect travelers with disabilities, become aware of their needs, and provide them with accessibility to activities and accommodations.

Issued by the Governor September 7, 1993.

Filed with the Secretary of State September 10, 1993.

ACTION CODES	
A - Adopted Rule	P - Proposed Rule
AR - Adopted Repealer	PF - Prohibited Filing Order by JCAR*
C - Notice of Corrections	PP - Peremptory or Court Ordered Rules
CC - Codification Changes	PR - Proposed Repealer
E - Emergency Rule	R - Refusal to meet JCAR Objection
ER - Emergency Repealer	RC - Statement of Recommendation
M - Modification to meet JCAR objections	S - Suspension ordered by JCAR
O - JCAR Statement of Objections	W - Withdrawal to meet JCAR Objections
RQ - Request for Correction	
EC - Expedited Corrections	
*Joint Committee on Administrative Rules	

ALL RULES ARE LISTED BY PART NUMBER AND HEADING ONLY. (FOR ACTION ON SPECIFIC SECTIONS, PLEASE REFER TO THE SECTIONS AFFECTED INDEX.) IF THERE ARE ANY QUESTIONS, PLEASE CONTACT THE ADMINISTRATIVE CODE DIVISION AT (217) 782-9786.

ABANDONED MINED LANDS RECLAMATION COUNCIL

4 III. Adm. Code 1000 Americans With Disabilities Act Grievance Procedure (A-20092/92; CC-1673)

AGING, DEPARTMENT ON

89 III. Adm. Code 240 Community Care Program (P-12251/92; A-224) (P-15203/92; A-6090) (P-14225)
89 III. Adm. Code 220 General Programmatic Requirements (P-883; A-8472) (E-1179)

AGRICULTURE, DEPARTMENT OF

4 III. Adm. Code 550 Americans With Disabilities Act Grievance Procedure (A-11744/92; CC-1673)
8 III. Adm. Code 110 Animal Diagnostic Laboratory Act (P-14717)
8 III. Adm. Code 75 Bovine Brucellosis (P-14728)
8 III. Adm. Code 257 Cooperative Groundwater Protection Program (P-14288)
8 III. Adm. Code 20 Definitions (P-14739)
8 III. Adm. Code 85 Diseased Animals (E-14052) (P-14747)
8 III. Adm. Code 65 Egg & Egg Products Act (P-527; A-6749)
8 III. Adm. Code 116 Equine Infectious Anemia Control (P-14761)
8 III. Adm. Code 700 Farm Preservation Act (P-9781)
8 III. Adm. Code 590 Feeder Swine Dealer Licensing (P-14765)
8 III. Adm. Code 115 Ill. Pseudorabies Control Act (E-5906) (P-6373; A-14006)
8 III. Adm. Code 256 Lawncare Wash Water & Rinsate Collection (P-14975/92; A-2189)
8 III. Adm. Code 40 Livestock Auction Markets (P-14769)
8 III. Adm. Code 610 Livestock Dealer Licensing (P-14775)
8 III. Adm. Code 125 Meat & Poultry Inspection Act (PP-2063) (PP-15725)
8 III. Adm. Code 290 Standardbred & Thoroughbred Horse Breeding & Racing Programs, Ill. (P-8347; W-13812)
8 III. Adm. Code 750 Sustainable Agriculture (P-1251; A-6965)
8 III. Adm. Code 105 Swine Disease Control & Eradication Act (E-5910) (P-6377; A-14010) (P-14781)

ALCOHOLISM AND SUBSTANCE ABUSE, DEPARTMENT OF
4 III. Adm. Code 500 Americans With Disabilities Act Grievance Procedure (A-11426/92; CC-1673)
77 III. Adm. Code 2090 Subacute Alcoholism & Substance Abuse Treatment Services (P-8599)
77 III. Adm. Code 2080 Triplicate Prescription Control Program (P-11367/92; O-16691/92; M-11872; A-11424)

ATTORNEY GENERAL

4 III. Adm. Code 125 Americans With Disabilities Act Grievance Procedure (P-2283/92; A-1811)

AUDITOR GENERAL

4 III. Adm. Code 1125 Americans With Disabilities Act Grievance Procedure (P-4523; A-11435)

BANKS AND TRUST COMPANIES, COMMISSIONER OF

4 III. Adm. Code 375 Americans With Disabilities Act Grievance Procedure (A-15976/92; CC-1673)

CAPITAL DEVELOPMENT BOARD

4 III. Adm. Code 725 Americans With Disabilities Act Grievance Procedure (A-11432/92; CC-1673)
71 III. Adm. Code 500 Asbestos Abatement Authority Act Procedures (P-3917)

CARNIVAL-AMUSEMENT SAFETY BOARD

56 III. Adm. Code 6000 Carnival & Amusement Ride Inspection Law (P-3922; RC-14185; A-14910)

CENTRAL MANAGEMENT SERVICES, DEPARTMENT OF

44 III. Adm. Code 5000 Acquisition, Management & Disposal of Real Property (P-11378/92; A-1006) (P-2105; A-10753) (E-2361) (P-15217) (E-15653)
80 III. Adm. Code 303 Conditions of Employment (P-19285/92; A-5587)
74 III. Adm. Code 900 Joint Rules of the Comptroller & the Dept. of Central Management Services: Prompt Payment (P-10677) (E-11168)
80 III. Adm. Code 2160 Local Government Health Plan (P-3577; A-11441)
80 III. Adm. Code 302 Merit & Fitness (P-17187/92; A-3169) (P-14788)
80 III. Adm. Code 310 Pay Plan (P-191; C-672; A-13409) (P-13679/92; A-238) (PP-498) (P-13179/92; A-590) (P-14001/92; A-1819) (P-18139/92; A-6441) (P-7605) (P-12481) (E-12900) (P-13657) (E-13789) (P-14314) (E-14666)
80 III. Adm. Code 2650 Solicitation for Charitable Payroll Deductions (P-2449)
44 III. Adm. Code 1 Standard Procurement (P-12808/92; A-600) (P-3926; A-14576)

CHILDREN AND FAMILY SERVICES, DEPARTMENT OF

89 III. Adm. Code 304 Access to & Eligibility for Child Welfare Services (P-7545/92; A-251)
89 III. Adm. Code 336 Appeal of Child Abuse & Neglect Investigation Findings (P-7963/92; A-1026)
89 III. Adm. Code 434 Audits, Reviews & Investigations (P-7115)
89 III. Adm. Code 330 Child Custody Investigations & Supervision Related to Custodian or Visitation Judgements (P-1259; A-11457)
89 III. Adm. Code 377 Facilities & Programs Exempt from Licensure (P-7553/92; A-259)
89 III. Adm. Code 354 Facility Amusement Funds (PR-8099)
89 III. Adm. Code 407 Licensing Standards for Day Care Centers (P-11955)
89 III. Adm. Code 406 Licensing Standards for Day Care Homes (P-11964)
89 III. Adm. Code 402 Licensing Standards for Foster Family Homes (P-11707/92; A-267)
89 III. Adm. Code 408 Licensing Standards for Group Day Care Homes (P-11976)

CHILDREN AND FAMILY SERVICES, DEPARTMENT OF (CONT'D)
 89 III. Adm. Code 378 Multiple Licensure (P-7561/92; AR-272)
 89 III. Adm. Code 356 Rate Setting (P-10679)
 89 III. Adm. Code 335 Relative Home Placement (P-6681) (P-12254/92; A-13420)
 89 III. Adm. Code 300 Reports of Child Abuse (P-15218) (E-15658)
 89 III. Adm. Code 309 Review & Appeal Process (PR-7982/92; AR-1044)
 89 III. Adm. Code 337 Service Appeal Process (P-7999/92; A-1046)
 89 III. Adm. Code 302 Services Delivered by the Department (P-7565/92; A-274) (P-11979/92; A-11979) (P-2460) (E-2513)
 89 III. Adm. Code 376 Standards for Department Facilities (PR-8104)

COMMERCE AND COMMUNITY AFFAIRS, DEPARTMENT OF
 4 III. Adm. Code 575 Americans With Disabilities Act Grievance Procedure (A-14621/92; CC-1673)
 47 III. Adm. Code 125 Emergency Community Services Homeless Grant Program (P-18879/92; A-6180)
 14 III. Adm. Code 520 Enterprise Zone Program (P-13691/92; A-1837) (P-9791)
 47 ILL. Adm. Code 510 III. Promotion Act Programs (P-14318)
 56 III. Adm. Code 2600 Low Income Home Energy Assistance Program (P-16707/92 A-3836)
 1 III. Adm. Code 300 Service Delivery System & State Responsibilities (P-7120/92; A-6483)
 47 III. Adm. Code 130 Small Business Impact Analysis Procedures (P-11391/92; A-1511)
 83 III. Adm. Code 745 State Administration of the III. Neighborhood Corps Program (PR-1; A-7212)
 Tariff Filings (P-10513/92; A-10258)

COMMERCE COMMISSION, ILLINOIS
 92 III. Adm. Code 1376 Accounting & Financial Record Requirements (P-8630)
 4 III. Adm. Code 400 Americans With Disabilities Act Grievance Procedure (A-12439/92; CC-1673)
 83 III. Adm. Code 305 Construction of Electric Power & Communication Lines (P-2462)
 83 III. Adm. Code 756 Dual Party Relay Service (P-14004/92; A-1848)
 92 III. Adm. Code 1360 Equipment Leases (P-1685)
 83 III. Adm. Code 792 Imputation (P-11988)
 83 III. Adm. Code 590 Minimum Safety Standards for Transportation of Gas & For Gas Pipeline Facilities (P-2466; A-12291)
 83 III. Adm. Code 255 Notice Requirements for Change in Rates for Cooling, Electric, Gas, Heating, Telecommunications, Sewer or Water Services (P-13703/92; A-798)
 83 III. Adm. Code 315 Pole Attachment Rates, Terms & Conditions Applicable to Cable Television Companies & Electric & Telephone Public Utilities (P-202)
 83 III. Adm. Code 280 Procedures for Gas, Electric, Water & Sanitary Sewer Utilities Governing Eligibility for Service, Deposits, Payment Practices & Discontinuance of Service (P-12810/92; A-805) (P-6382)
 83 III. Adm. Code 735 Procedures Governing the Establishment of Credit, Billing Termination of Service & Issuance of Telephone Directories for Telephone Utilities in the State of Ill. (G.O. #218) (P-6386) (P-12483)
 83 III. Adm. Code 275 Promotional Practices of Electric & Gas Public Utilities (P-8269/92; A-98; RQ-2075; EC-3902)
 92 III. Adm. Code 1236 Reinstatement of Revoked Operating Authority (P-9167)
 83 III. Adm. Code 755 Telecommunications Access for the Hearing & Voice Impaired (P-16709/92; A-5594)
 83 III. Adm. Code 756 Telecommunications Relay Services (P-15605/92; A-12294)
 92 III. Adm. Code 1375 Uniform System of Accounts (P-8635)

COMMUNITY COLLEGE BOARD, ILLINOIS
 23 III. Adm. Code 1501 Administration of the Ill. Public Community College Act (P-12274/92; A-1853) (P-6686) (P-11993)
 4 III. Adm. Code 1050 Americans With Disabilities Act Grievance Procedure (P-17399/92; A-4185)
 2 III. Adm. Code 5176 Public Access to Information (CC-6903)
 2 III. Adm. Code 5175 Public Information, Rulemaking and Organization (CC-6904)

COMMUNITY DEVELOPMENT FINANCE CORPORATION, ILLINOIS
 47 III. Adm. Code 700 By-Laws (P-4530)

COMPTROLLER
 4 III. Adm. Code 775 Americans with Disabilities Act Grievance Procedure (P-13710/92; A-6499)
 74 III. Adm. Code 330 Joint Rules of the Comptroller & the Dept. of Central Management Services: Prompt Payment (P-10686) (E-11170)
 80 III. Adm. Code 500 Personnel Rules (P-13827)

CONSERVATION, DEPARTMENT OF
 17 III. Adm. Code 530 Cock Pheasant, Hungarian Partridge, Bobwhite Quail, Rabbit & Crow Hunting (P-7138; A-15534)
 17 III. Adm. Code 830 Commercial Fishing & Musseling in Certain Waters of the State (P-17405/92; A-3177)
 17 III. Adm. Code 950 Dog Training on Department-Owned or -Managed Sites (P-6390; A-13447)
 17 III. Adm. Code 730 Dove Hunting (P-4539; A-10761)
 17 III. Adm. Code 590 Duck, Goose & Coot Hunting (E-1658) (4554)
 17 III. Adm. Code 1536 Forestry Development Cost-Share Program (P-8107)
 17 III. Adm. Code 510 General Hunting & Trapping on Department-Owned or -Managed Sites (P-4601; A-10775)
 17 III. Adm. Code 1050 III. List of Endangered & Threatened Flora (P-4608; A-10781)
 17 III. Adm. Code 4000 Management of Nature Preserves (P-12005)
 17 III. Adm. Code 570 Muskrat, Mink, Raccoon, Opossum, Striped Skunk, Weasel, Red Fox, Gray Fox, Coyote, Beaver & Woodchuck (Groundhog) Trapping (P-4611; A-10785) (P-12038)
 17 III. Adm. Code 220 North Point Marina (P-19993/92; A-6760)
 17 III. Adm. Code 1070 Possession of Specimens or Products of Endangered or Threatened Species (P-12041)

17 III. Adm. Code 550 Raccoon, Opossum, Striped Skunk, Red Fox, Gray Fox, Coyote & Woodchuck (Groundhog) Hunting (P-4622; A-10795)
 17 III. Adm. Code 810 Sport Fishing Regulations for the Waters of Ill. (P-17414/92; A-3853; E-5915) (P-4636; A-10806)
 17 III. Adm. Code 690 Squirrel Hunting (P-4672; A-10842)
 17 III. Adm. Code 720 Taking of Wild Turkeys-Fall Archery Season, The (P-15260/92; A-281) (P-4680; A-10850)
 17 III. Adm. Code 715 Taking of Wild Turkeys-Fall Gun Season (P-4689; A-10858)
 17 III. Adm. Code 710 Taking of Wild Turkeys-Spring Season, The (P-18181/92; A-3184)
 17 III. Adm. Code 670 White-Tailed Deer Hunting by Use of Bow and Arrow (P-15265/92; A-286) (P-4698; A-13452)
 17 III. Adm. Code 650 White-Tailed Deer Hunting by Use of Firearms (P-4718; A-13468)
 17 III. Adm. Code 680 White-Tailed Deer Hunting by Use of Handguns (P-12055)

CONSERVATION, DEPARTMENT OF (CONT'D)

17 III. Adm. Code 660 White-Tailed Deer Hunting Season by Use of Muzzleloading Rifles (P-4742; A-10865)
17 III. Adm. Code 740 Woodchuck, Snipe, Rail & Teal Hunting (P-4757; A-10877)

CORRECTIONS, DEPARTMENT OF

20 III. Adm. Code 440 Advocacy Services (PR-16371/92; AR-1519)
4 III. Adm. Code 475 American With Disabilities Act Grievance Procedure (A-10423/92; CC-1673)
20 III. Adm. Code 525 Rights & Privileges (PP-1666; RQ-9150; C-10013; EC-11903) (PP-8069)
20 III. Adm. Code 502 Safety, Maintenance & Sanitation (P-6394)
20 III. Adm. Code 501 Security (P-8396)

CRIMINAL JUSTICE INFORMATION AUTHORITY

4 III. Adm. Code 150 Americans With Disabilities Act Grievance Procedure (P-1263)

DEVELOPMENT FINANCE AUTHORITY, ILLINOIS

14 III. Adm. Code 1230 Employee Ownership Assistance Program (P-9222/92; A-1859)

EDUCATIONAL FACILITIES AUTHORITY, ILLINOIS

23 III. Adm. Code 2310 Functions & Planning Program (P-1691; A-9680)

EDUCATIONAL LABOR RELATIONS BOARD, ILLINOIS

4 III. Adm. Code 900 Americans With Disabilities Act Grievance Procedure (P-9273/92; A-9887)

EDUCATION, STATE BOARD OF

2 III. Adm. Code 5001 Access to Information of the State Board of Education Under the Freedom of Information Act (A-14913)
23 III. Adm. Code 210 Learning Assessment & School Improvement Plans (PR-10061)
23 III. Adm. Code 451 Private Business & Vocational Schools (P-12062)
23 III. Adm. Code 1 Public Schools Evaluation, Recognition & Supervision (P-8684/92; A-18010/92; EC-3553) (P-10079)
23 III. Adm. Code 226 Special Education (P-13231) (E-13622)
23 III. Adm. Code 228 Transitional Bilingual Education (P-9253/92; A-104)
23 III. Adm. Code 245 Urban Education Partnership Program (P-10131)

ELECTIONS, STATE BOARD OF

26 III. Adm. Code 100 Campaign Finance Act, The (P-14333)
26 III. Adm. Code 207 Miscellaneous (P-14342)

EMERGENCY MANAGEMENT AGENCY, ILLINOIS

29 III. Adm. Code 1310 Emergency Management Assistance Program (P-13843)
29 III. Adm. Code 1300 Emergency Services & Disaster Agencies: Establishment, Accreditation, & Workers' Compensation (P-13856)
29 III. Adm. Code 300 Local Emergency Services & Disaster Agencies: Establishment, Jurisdiction, & Accreditation (PR-13865)
29 III. Adm. Code 510 Workers' Compensation Coverage (PR-13875)

EMPLOYMENT SECURITY, DEPARTMENT OF

4 III. Adm. Code 1025 Americans With Disabilities Act Grievance Procedure (P-13188/92; A-8802)
56 III. Adm. Code 2865 Claimant's Availability For Work, Ability To Work & Active Search For Work (P-6907)
56 III. Adm. Code 2840 Claimant's Reason For Separation From Work (P-886; A-10270) (P-8403)
56 III. Adm. Code 2720 Claims, Adjudication, Appeals & Hearings (P-6919)
56 III. Adm. Code 2732 Determination of Unemployment Contributions (P-15625/92; A-295)
56 III. Adm. Code 2770 Employment (P-211; A-8809) (P-5985)
56 III. Adm. Code 2712 General Application (P-17853/92; A-3194)
56 III. Adm. Code 2760 Notices, Records, Reports (E-13798)
56 III. Adm. Code 2765 Payment of Unemployment Contributions, Interest & Penalties (P-12006/92; A-308) (P-15638/92; A-614) (P-2523; A-10275) (E-13801)

ENVIRONMENTAL PROTECTION AGENCY

4 III. Adm. Code 925 Americans With Disabilities Act Grievance Procedure (P-10534/92; A-8162)
35 III. Adm. Code 254 Annual Emissions Report (P-17195/92; A-7782)
35 III. Adm. Code 183 Joint Rules of the III. Environmental Protection Agency, the III. Department of Public Health & the III. Department of Nuclear Safety: Certification & Operation of Environmental Laboratories (P-12659/92; A-12319)
32 III. Adm. Code 332 Licensing Requirements for Source Material Milling Facilities (P-10701)
35 III. Adm. Code 320 Permit Fees for Installing or Extending Sewers (P-2469; A-11461)
35 III. Adm. Code 858 Procedures for Operation of the Non-Hazardous Solid Waste Fee System (P-4621/92; A-4190)
35 III. Adm. Code 876 Processing of Claims for Payment from the Underground Storage Tank Fund (E-16191/92; O-18856/92; RC-18857/92; M-2438)
35 III. Adm. Code 252 Public Participation in the Air Pollution Control Permit Program (P-18139/92; A-9684)
35 III. Adm. Code 253 Public Participation in the Air Pollution Permit Program (P-18139/92; A-9698)

FARM DEVELOPMENT AUTHORITY, ILLINOIS

8 III. Adm. Code 1400 III. Farm Development Authority (P-8297/92; A-3618) (P-3956)

FINANCIAL INSTITUTIONS, DEPARTMENT OF

38 III. Adm. Code 190 III. Credit Union Act (P-6599; W-13197)
38 III. Adm. Code 130 Schedules of Maximum Rates to be Charged for Check Cashing & Writing of Money Orders by Community & Ambulatory Currency Exchanges (P-6929)
38 III. Adm. Code 180 Uniform Disposition of Unclaimed Property Act (P-14006/92; A-123) (P-5990; A-9893) (E-6321)

FIRE MARSHAL, OFFICE OF THE STATE

4 III. Adm. Code 200 Americans With Disabilities Act Grievance Procedure (P-1954/92; A-2200)
41 III. Adm. Code 120 Boiler & Pressure Vessel Safety (P-19291/92; A-14917)
41 III. Adm. Code 280 Fire Equipment Administrative Procedures (P-15665/92; A-7214)
41 III. Adm. Code 100 Fire Prevention & Safety (P-15681/92; PF-8083; W-10010)
41 III. Adm. Code 140 Policy & Procedures Manual for Fire Protection Personnel (P-14017/92; W-9752) (E-11181) (P-14352)

INSURANCE, DEPARTMENT OF (CONT'D)
50 Ill. Adm. Code 2008
Minimum Standards for Individual & Group Medicare Supplement Insurance (P-18917/92; A-11469)
50 Ill. Adm. Code 802
Purchasing & Selling Call & Put Options Contracts (P-44; A-6783) (E-163)
50 Ill. Adm. Code 916
Required Procedure for Filing & Securing Approval of Life Insurance, Annuity, & Accident & Health Insurance Policy Forms; (P-5992)
50 Ill. Adm. Code 6201
Requirements (P-14073)

JOINT COMMITTEE ON ADMINISTRATIVE RULES
1 Ill. Adm. Code 260
Complaint Review (CC-5960) (P-13233)
1 Ill. Adm. Code 245
Expedited Corrections (CC-5962) (P-13248)
1 Ill. Adm. Code 250
Five-Year Evaluation of all Existing Rules (CC-5964) (P-13257)
1 Ill. Adm. Code 210
General Policies (CC-5965) (P-13268)
1 Ill. Adm. Code 230
Review of Emergency Rulemaking (CC-5967) (P-13274)
1 Ill. Adm. Code 240
Review of Peremptory Rulemaking (CC-5969) (P-13294)
1 Ill. Adm. Code 220
Review of Proposed Rulemaking (CC-5971) (P-13307)

LABOR, DEPARTMENT OF
56 Ill. Adm. Code 350
Health & Safety (P-3780/92; O-180; R-1239; A-1074) (E-7072)

LABOR RELATIONS BOARD, ILLINOIS STATE/ILLINOIS LOCAL
80 Ill. Adm. Code 1200
General Procedures (P-3703; A-15588)
80 Ill. Adm. Code 1230
Impasse Resolution (P-3718; A-15599)
80 Ill. Adm. Code 1210
Representation Proceedings (P-3734; A-15612)
80 Ill. Adm. Code 1220
Unfair Labor Practice Proceedings (P-3755; A-15628)

LOTTERY, DEPARTMENT OF THE
11 Ill. Adm. Code 1770
Lottery (General) (P-16738/92; C-8074)

MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES, DEPARTMENT OF
59 Ill. Adm. Code 101
Administration (P-10688)
59 Ill. Adm. Code 122
Certification Under Medicaid Rehabilitation Option for Early Intervention Programs (P-15691/92; RC-3688; A-4236)
59 Ill. Adm. Code 121
Early Intervention Program (P-15715/92; RC-3689; A-4261)
59 Ill. Adm. Code 103
Grants (P-14078/92; A-10282)
59 Ill. Adm. Code 119
Minimum Standards for Certification of Developmental Training Programs (P-6397)

MINES AND MINERALS, DEPARTMENT OF
62 Ill. Adm. Code 1847
Administrative & Judicial Review (P-10596/92; A-10887)
62 Ill. Adm. Code 1775
Administrative & Judicial Review of Decisions (PR-10590/92; AR-10907)
62 Ill. Adm. Code 1761
Areas Designated by Act of Congress (P-10596/92; A-10909)
62 Ill. Adm. Code 1800
Bonding & Insurance Requirements for Surface Coal Mining & Reclamation Operations (P-10607/92; A-10916)
62 Ill. Adm. Code 1845
Civil Penalties (P-10619/92; A-10926)
62 Ill. Adm. Code 1702
Exemption for Coal Extraction Incidental to the Extraction of Other Minerals (P-10631/92; A-10936)

FIRE MARSHAL, OFFICE OF THE STATE (CONT'D)
41 Ill. Adm. Code 170
Storage, Transportation, Sale & Use of Petroleum & Other Regulated Substances (E-1186)

GAMING BOARD, ILLINOIS
86 Ill. Adm. Code 3000
Riverboat Gambling (P-511/92; A-11510)

HEALTH CARE COST CONTAINMENT COUNCIL, ILLINOIS
77 Ill. Adm. Code 2510
Data Collection (P-18913/92; A-9700) (P-1695) (E-2031) (E-14112)
77 Ill. Adm. Code 2530
Hospital Price Information (E-14172)
77 Ill. Adm. Code 2540
Penalties (P-18915/92; A-9713)
77 Ill. Adm. Code 2510
Special Studies & Analyses (P-1695; A-9896)

HEARING AID CONSUMER PROTECTION BOARD
77 Ill. Adm. Code 3000
Hearing Aid Protection Continuing Education Requirements (P-13463/92; A-8817)

HIGHER EDUCATION, BOARD OF
4 Ill. Adm. Code 975
Americans With Disabilities Act Grievance Procedure (A-19806/92; CC-1673)

HISTORIC PRESERVATION AGENCY, ILLINOIS
17 Ill. Adm. Code 4180
Rules for Review of State Agency Undertakings (P-13718/92; A-1521)

HOUSING DEVELOPMENT AUTHORITY, ILLINOIS
4 Ill. Adm. Code 700
Americans with Disabilities Act Grievance Procedure (P-15684/92; A-6507)
47 Ill. Adm. Code 310
Multifamily Rental Housing Mortgage Loan Program (P-13659) (E-13805)
47 Ill. Adm. Code 370
National Affordable Housing Act (HOME) Program (P-11713/92; A-319)

HUMAN RIGHTS, DEPARTMENT OF
56 Ill. Adm. Code 2520
Procedural (P-10; A-15556)

INDUSTRIAL COMMISSION, ILLINOIS
4 Ill. Adm. Code 225
Americans With Disabilities Grievance Procedure (P-7749/92; A-2945)
50 Ill. Adm. Code 7020
Pre-Arbitration (P-14511/92; A-2206)

INSURANCE, DEPARTMENT OF
50 Ill. Adm. Code 1408
Actuarial Opinion & Memorandum (P-8735/92; A-4195)
50 Ill. Adm. Code 920
Actuarial Qualification (PR-2530)
50 Ill. Adm. Code 927
Anticipated Salvage & Subrogation Recoverable (P-2106)
50 Ill. Adm. Code 932
Automobile Anti-Theft Mechanisms (P-7279/92; O-1240; M-6893; A-6768)
50 Ill. Adm. Code 1250
Corrective Orders (P-3985)
50 Ill. Adm. Code 805
Financial Futures Contracts (P-42; A-6775) (E-154)
50 Ill. Adm. Code 2013
Group Coverage Discontinuance & Replacement (P-10375/92; A-1525)
50 Ill. Adm. Code 2015
Infertility Coverage (P-696; A-8170)
50 Ill. Adm. Code 904
Internal Security Standard & Fidelity Bona (P-3993; A-15584)
50 Ill. Adm. Code 1103
Life Reinsurance Agreements (P-8411)
50 Ill. Adm. Code 2012
Long-Term Care Insurance (P-11279)
50 Ill. Adm. Code 939
Medical Liability Insurance Loss Reports (P-4768)

MINES AND MINERALS, DEPARTMENT OF (CONT'D)
62 III. Adm. Code 1777 General Content Requirements for Permit Applications (P-10640/92; A-10943)
62 III. Adm. Code 1701 General Definitions (P-10644/92; A-10947)
62 III. Adm. Code 1848 General Rules Relating to Procedure & Practice (P-10669/92; A-10973)
62 III. Adm. Code 240 Ill. Oil & Gas Act, The (E-1195) (P-13722/92; A-2217) (P-3771; A-14097)
62 III. Adm. Code 1846 Individual Civil Penalties (P-10691/92; A-10997)
62 III. Adm. Code 1816 Permanent Program Performance Standards--Surface Mining Activities (P-10695/92; A-11001)
62 III. Adm. Code 1817 Permanent Program Performance Standards--Underground Mining Operations (P-10726/92; A-11031)
62 III. Adm. Code 1778 Permit Applications--Minimum Requirements for Legal, Financial, Compliance, & Related Information (P-10758/92; A-11027)
44 III. Adm. Code 610 Plugging & Restoration Contracts (P-1697; A-8176)
62 III. Adm. Code 1772 Requirements for Coal Exploration (P-10762/92; A-11058)
62 III. Adm. Code 1773 Requirements for Permits & Permit Processing (P-10768/92; A-11063)
62 III. Adm. Code 1785 Requirements for Permits for Special Categories of Mining (P-10784/92; A-11075)
62 III. Adm. Code 1705 Restriction on Financial Interests of State Employees (P-10790/92; A-11080)
62 III. Adm. Code 1774 Revision; Renewal; & Transfer, Assignment, or Sale of Permit Rights (P-10793/92; A-11083)
62 III. Adm. Code 1827 Special Permanent Program Performance Standards--Coal Preparation Plants Not Located Within the Permit Area of a Mine (P-10803/92; A-11091)
62 III. Adm. Code 1843 State Enforcement (P-10807/92; A-11095)
62 III. Adm. Code 1764 State Processes for Designating Areas Unsuitable for Surface coal Mining Operations (P-10831/92; A-11114)
62 III. Adm. Code 1779 Surface Mining Permit Applications--Minimum Requirements for Information on Environmental Resources (P-10835/92; A-11118)
62 III. Adm. Code 1780 Surface Mining Permit Applications--Minimum Requirements for Reclamation & Operation Plan (P-10839/92; A-11122)
62 III. Adm. Code 1783 Underground Mining Permit Applications--Minimum Requirements for Information on Environmental Resources (P-10849/92; A-11131)
62 III. Adm. Code 1784 Underground Mining Permit Applications--Minimum Requirements for Reclamation & Operation Plan (P-10853/92; A-11135)

NUCLEAR SAFETY, DEPARTMENT OF
32 III. Adm. Code 333 Fees for Calibration Services (P-9797)
32 III. Adm. Code 310 General Provisions (P-3787)
32 III. Adm. Code 195 Joint Rules of the Ill. Environmental Protection Agency, the Ill. Department of Public Health & the Ill. Department of Nuclear Safety: Certification & Operation of Environmental Laboratories (P-12756/92; A-12407)
32 III. Adm. Code 330 Licensing of Radioactive Material (P-14417)
32 III. Adm. Code 332 Licensing Requirements for Source Material Milling Facilities (P-10701)
32 III. Adm. Code 400 Notices, Instructions & Reports to Workers; Inspections (P-8655)
32 III. Adm. Code 390 Particle Accelerators (P-8666)
32 III. Adm. Code 350 Radiation Safety Requirements for Industrial Radiographic Operations (P-13882)
32 III. Adm. Code 351 Radiation Safety Requirements for Wireline Service Operations & Subsurface Tracer Studies (P-8674)

NUCLEAR SAFETY, DEPARTMENT OF (CONT'D)
32 III. Adm. Code 320 Registration of Radioactive Materials, Radiation Machine, & Radiation Installations (P-8693)
32 III. Adm. Code 505 Safe Operation of Nuclear Facility Boilers & Pressure Vessels (P-15220) (E-15667)
32 III. Adm. Code 340 Standards for Protection Against Radiation (P-3997) (P-4070)
32 III. Adm. Code 341 Transportation of Radioactive Material (P-13933)
32 III. Adm. Code 335 Use of Radionuclides in the Healing Arts (E-9099)

PLANNING COUNCIL ON DEVELOPMENTAL DISABILITIES, ILLINOIS
4 III. Adm. Code 800 Americans With Disabilities Act Grievance Procedure (P-11988/92; A-11143)
59 III. Adm. Code 400 Grants (P-11996/92; A-11151)

POLLUTION CONTROL BOARD
35 III. Adm. Code 1421 Activity Standards (P-19615/92; A-10392)
35 III. Adm. Code 211 Definitions & General Provisions (P-4782) (P-12491) (P-13354)
35 III. Adm. Code 1422 Design & Operation of Facilities (P-20002/92; O-8084; M-10007; A-9911)
35 III. Adm. Code 304 Effluent Standards (P-15223)
35 III. Adm. Code 615 Existing Activities In A Setback Zone or Regulated Recharge Area (P-16465/92; A-1871)
35 III. Adm. Code 604 Finished Water & Raw Water Quality & Quantity (PR-7621; AR-12648)
35 III. Adm. Code 1420 General Provisions (P-19625/92; A-9947)
35 III. Adm. Code 738 Hazardous Waste Injection Restrictions (P-16770/92; A-6190) (P-8423; A-15641)
35 III. Adm. Code 720 Hazardous Waste Management System (P-16776/92; A-5625) (P-9170)
35 III. Adm. Code 721 Identification & Listing of Hazardous Waste (P-16801/92; A-5650) (P-9193)
35 III. Adm. Code 725 Interim Status Standards for Owners & Operators of Hazardous Waste Treatment, Storage & Disposal Facilities (P-16831/92; A-5681) (P-9245)
35 III. Adm. Code 728 Land Disposal Restrictions (P-16878/92; A-5727) (P-9317)
35 III. Adm. Code 203 Major Stationary Sources Construction & Modification (P-4898) (P-18919/92; A-6973)
35 III. Adm. Code 616 New Activities In A Setback Zone or Regulated Recharge Area (P-16473/92; A-1878)
35 III. Adm. Code 237 Open Burning (E-14176)
35 III. Adm. Code 218 Organic Material Emission Standards & Limitations for the Chicago Area (P-4905; C-6520) (P-12508)
35 III. Adm. Code 219 Organic Material Emission Standards & Limitations for the Metro East Area (P-5169; C-6539) (E-8295)
35 III. Adm. Code 201 Permits & General Provisions (P-13371)
35 III. Adm. Code 611 Primary Drinking Water Standards (P-2533; A-7796) (P-7629; A-12650)
35 III. Adm. Code 813 Procedural Requirements for Permitted Landfills (P-16920/92; A-12409)
35 III. Adm. Code 702 RCRA & UIC Permit Programs (P-16924/92; A-5769)
35 III. Adm. Code 703 RCRA Permit Program (P-16930/92; A-5774) (P-9417)
35 III. Adm. Code 605 Sampling & Monitoring (P-2682; A-7943) (PR-7738; AR-12780)
35 III. Adm. Code 307 Sewer Discharge Criteria (P-9803)
35 III. Adm. Code 810 Solid Waste Disposal; General Provisions (P-8702)
35 III. Adm. Code 722 Standards Applicable to Generators of Hazardous Waste (P-9445)
35 III. Adm. Code 814 Standards for Existing Landfills & Units (P-8714)

POLLUTION CONTROL BOARD (CONT'D)	
35 Ill. Adm. Code 811	Standards for New Solid Waste Landfills (P-8726) (P-16921/92; A-12413)
35 Ill. Adm. Code 724	Standards for Owners & Operators of Hazardous Waste Treatment, Storage & Disposal Facilities (P-16970/92; A-5806) (P-9453)
35 Ill. Adm. Code 726	Standards for the Management of Specific Hazardous Waste & Specific Types of Hazardous Waste Management Facilities (P-17028/92; A-5865) (P-9528)
35 Ill. Adm. Code 739	Standards for the Management of Used Oil (P-9588)
35 Ill. Adm. Code 232	Toxic Air Contaminants (P-14540)
35 Ill. Adm. Code 730	Underground Injection Control Operating Requirements (P-8428; A-15646)
PROFESSIONAL REGULATION, DEPARTMENT OF	
4 Ill. Adm. Code 275	Americans With Disabilities Act Grievance Procedure (A-7003/92; CC-1673)
68 Ill. Adm. Code 1470	Clinical Social Work & Social Work Practice Act (P-8435)
68 Ill. Adm. Code 1210	Collection Agency Act (P-16374/92; A-1535)
68 Ill. Adm. Code 1250	Funeral Directors & Embalmers Act (P-11315)
68 Ill. Adm. Code 1150	III. Architecture Practice Act of 1989 (P-17042/92; A-1554) (P-11337)
68 Ill. Adm. Code 1220	III. Dental Practice Act (P-15762/92; A-1559) (P-1708) (P-8127) (E-8309)
68 Ill. Adm. Code 1300	III. Nursing Act of 1987 (P-16484/92; A-1572)
68 Ill. Adm. Code 1340	III. Physical Therapy Act (P-8444; A-14606)
68 Ill. Adm. Code 1270	III. Professional Land Surveyor Act of 1989 (P-14550)
68 Ill. Adm. Code 1465	III. Speech-Language Pathology & Audiology Practice Act, The (P-890)
68 Ill. Adm. Code 1285	Medical Practice Act of 1987 (P-9624)
68 Ill. Adm. Code 1310	Nursing Home Administrators Licensing & Disciplinary Act (P-8139)
68 Ill. Adm. Code 1320	Optometric Practice Act of 1987 (P-6729) (P-14559)
68 Ill. Adm. Code 1240	Private Detective, Private Alarm & Private Security Act of 1983 (P-15775/92; A-1579)
68 Ill. Adm. Code 1430	Public Accounting Act (Professional Conduct) (P-4141A-13487)
68 Ill. Adm. Code 1455	Real Estate Appraiser Certification (P-15785/92; A-1589) (P-6612; A-13494) (E-6668)
68 Ill. Adm. Code 1480	Structural Engineering Licensing Act of 1989, The (P-4149; A-11162)

PUBLIC AID, DEPARTMENT OF	
89 Ill. Adm. Code 112	Aid to Families With Dependent Children (P-46) (P-3335/92; A-357) (P-13381/92; A-813) (P-14522/92; A-813) (P-15277/92; A-2253) (P-18216/92; A-4312) (P-5436; A-15017) (P-6026; A-15017) (E-6325) (P-19642/92; A-6792) (P-7745; A-15017) (P-10705)
89 Ill. Adm. Code 113	Aid to the Aged, Blind or Disabled (P-702; A-6804) (P-13383/92; A-827) (P-13380) (P-14999/92; A-2263) (P-14533/92; A-3202) (P-17047/92; A-4322) (P-17457/92; P-6804) (P-7755; A-14612)
89 Ill. Adm. Code 110	Application Process (P-13207/92; A-640)
89 Ill. Adm. Code 111	Assistance Standards (P-16491/92; A-3213)
89 Ill. Adm. Code 160	Child Support Enforcement (P-8892/92; A-2272) (P-3820) (P-12067) (P-12573) (P-15229)
89 Ill. Adm. Code 165	Collections & Recoveries (P-2110; A-8187) (P-6614; RC-14186)
89 Ill. Adm. Code 116	Crisis Assistance (P-13764/92; A-1078) (P-12092)
89 Ill. Adm. Code 170	Demonstration Programs (P-10736)

PUBLIC AID, DEPARTMENT OF (CONT'D)	
89 Ill. Adm. Code 144	Developmental Disabilities Service (P-899; A-8478) (P-2477; A-11480) (P-14796) (E-15126)
89 Ill. Adm. Code 149	Diagnosis Related Grouping (DRG) Prospective Payment System (PPS) (P-14535/92; A-3217) (P-9829) (P-15243)
89 Ill. Adm. Code 121	Food Stamps (P-13385/92; A-644) (P-15813/92; A-4333) (P-7165; A-14625) (P-14798) (E-15149)
89 Ill. Adm. Code 114	General Assistance (P-13395/92; A-1091) (P-15008/92; A-2277) (P-15287/92; A-2277) (P-15810/92; A-3255) (P-14538/92; A-3639) (P-19654/92; A-6814) (P-17459/92; A-6814) (P-18226/92; A-6814)
89 Ill. Adm. Code 148	Hospital Services (P-10868/92; A-131) (P-14540/92; A-3296) (P-12826/92; RC-6549; A-6649) (P-6935; A-14643) (P-9840) (P-15291)
89 Ill. Adm. Code 120	Medical Assistance Programs (P-711; A-6827) (P-14544/92; A-1102) (P-2114; A-10402) (P-13392)
89 Ill. Adm. Code 140	Medical Payment (P-62; A-6839) (P-13211/92; A-837) (P-7576/92; A-1112) (P-13397/92; O-1241; R-2436; A-2290; F-3058) (P-15296/92; A-2951) (P-15019/92; A-3421) (P-12838/92; A-19146/92; RQ-4517; EC-7078) (P-17049/92; A-6196) (P-16495/92; A-6196) (P-17956/92; A-6196) (P-17461/92; A-6839) (P-19665/92; A-6839) (P-17209/92; A-7004) (P-7183) (E-11201) (P-10749) (P-14800) (E-15162) (P-15444)
89 Ill. Adm. Code 104	Practice in Administrative Hearings (P-540; A-7025) (E-659)
89 Ill. Adm. Code 147	Reimbursement for Nursing Costs for Geriatric Facilities (P-13215/92; A-1128) (P-1716; A-8486) (P-5471; A-13498) (P-14081) (P-14803) (E-15189)
89 Ill. Adm. Code 117	Related Program Provisions (P-2126; A-8191) (E-2368)
89 Ill. Adm. Code 102	Rights & Responsibilities (P-15461)
89 Ill. Adm. Code 118	Special Eligibility Groups (E-11217) (P-10751)
89 Ill. Adm. Code 103	Support Responsibility of Relatives (P-14178/92; A-655)
4 Ill. Adm. Code 1075	Americans With Disabilities Act Grievance Procedure (P-14182/92; A-142)

PUBLIC HEALTH, DEPARTMENT OF	
77 Ill. Adm. Code 697	AIDS Confidentiality & Testing Code (E-1204) (P-2687)
77 Ill. Adm. Code 692	AIDS Drug Reimbursement Program (P-12590) (E-12913)
77 Ill. Adm. Code 205	Ambulatory Surgical Treatment Center Licensing Requirements (P-3426/92; A-3507)
77 Ill. Adm. Code 595	Baccalaureate Assistance for Registered Nurses (P-17447/92; A-13746)
77 Ill. Adm. Code 600	Certified Local Health Department Code (E-12918) (P-14806)
77 Ill. Adm. Code 665	Child Health Examination Code (P-2697)
77 Ill. Adm. Code 694	College Immunization Code (P-13414/92; A-2306)
77 Ill. Adm. Code 693	Control of Sexually Transmissible Diseases Code (E-1213) (P-2711)
77 Ill. Adm. Code 900	Drinking Water Standards (P-10870/92; A-4388)
77 Ill. Adm. Code 535	Emergency Medical Services Code (P-10911/92; A-8196)
77 Ill. Adm. Code 750	Food Service Sanitation Code (P-723)
77 Ill. Adm. Code 775	Grade A Pasteurized Milk & Milk Products (P-906; A-14015)
77 Ill. Adm. Code 1235	Health Care Worker Self-Referral (P-683; A-8498)
77 Ill. Adm. Code 1130	Health Facilities Planning Procedural Rules (P-4755/92; O-1242)

PUBLIC HEALTH, DEPARTMENT OF (CONT'D)

77 Ill. Adm. Code 682 Hearing Aid Consumer Protection Code (P-13428/92; A-8825)
77 Ill. Adm. Code 250 Hospital Licensing Requirements (P-2016/92; A-1614)
77 Ill. Adm. Code 790 III. Drug Formulary for the Drug Product Selection Program (P-17496/92; W-7075) (P-7198) (E-7283)
77 Ill. Adm. Code 840 III. Health & Hazardous Substances Registry (P-4329/92; A-2319)
77 Ill. Adm. Code 245 III. Home Health Agency Code (P-747)
77 Ill. Adm. Code 890 III. Plumbing Code (O-14187)
77 Ill. Adm. Code 540 III. Trauma Center Code (P-15023/92; A-8258) (P-12101) (E-12439)
77 Ill. Adm. Code 915 III. Water Well & Pump Installation Contractor's License Code, The (P-10989/92; A-4425)
77 Ill. Adm. Code 695 Immunization Code (P-13472/92; A-2975)
77 Ill. Adm. Code 350 Intermediate Care for the Developmentally Disabled Facilities Code (P-4791/92; A-2351) (P-1269) (E-2373) (P-6028; A-15056) (E-7948) (P-8781) (E-9105) (P-10144) (P-12104)
77 Ill. Adm. Code 190 Joint Rules of the Ill. Environmental Protection Agency, the Ill. Department of Public Health & the Ill. Department of Nuclear Safety: Certification & Operation of Environmental Laboratories (P-12769/92; A-12421)
77 Ill. Adm. Code 845 Lead Poisoning Prevention Code (P-12314/92; O-1243; M-2073; A-1884)
77 Ill. Adm. Code 610 Local Health Department Grant Rules (E-12936) (P-14824)
77 Ill. Adm. Code 615 Local Health Departments Program Standards Code (E-12944)
77 Ill. Adm. Code 615 Local Health Protection Grant Rules (E-13002)
77 Ill. Adm. Code 395 Long-Term Care Assistants & Aides Training Programs Code (P-8066/92; O A-2984)
77 Ill. Adm. Code 390 Long-Term Care for Under Age 22 Facilities Code (P-1296) (E-2390) (P-6044; A-15073)
77 Ill. Adm. Code 785 (E-7974) (P-10171) (P-12128)
77 Ill. Adm. Code 630 Manufactured Dairy Products (P-920; A-14027)
77 Ill. Adm. Code 600 Maternal & Child Health Services Code (P-8103/92; A-3013) (P-3069)
77 Ill. Adm. Code 370 Minimum Qualifications for Personnel Employed by Local Health Departments Code (E-13115) (P-14831)
77 Ill. Adm. Code 661 Minimum Standards for the Licensure of Community Living Facilities (P-8793) (E-9117)
77 Ill. Adm. Code 597 Newborn Metabolic Screening & Treatment Code (P-757; A-13609)
68 Ill. Adm. Code 750 Nursing Education Scholarships (P-17529/92; A-13763)
77 Ill. Adm. Code 593 Plumbers Licensing Code (P-15056/92; A-417)
77 Ill. Adm. Code 505 Podiatric Scholarship & Residency Programs Code (P-11352)
77 Ill. Adm. Code 845 Pregnancy Termination Report Code (P-13406) (E-13631)
77 Ill. Adm. Code 100 Prevention of Lead Poisoning (P-12314/92; O-1243)
77 Ill. Adm. Code 330 Rules of Practice & Procedure in Administrative Hearings (P-12153)
77 Ill. Adm. Code 300 Sheltered Care Facilities Code (P-1321) (E-2405) (P-6059; A-15089) (E-8000) (P-10198) (P-12188)
77 Ill. Adm. Code 270 Skilled Nursing & Intermediate Care Facilities Code (P-1346) (E-2420) (P-6074; A-15106) (E-8026) (P-10225) (P-12205)
77 Ill. Adm. Code 672 Subacute Care Hospital Demonstration Program Code (P-9654)
WIC Vendor Management Code (P-12228)

PUBLIC HEALTH, DEPARTMENT OF/HEALTH FACILITIES PLANNING BOARD

77 Ill. Adm. Code 1230 Financial & Economic Feasibility Review & Evaluation Plan (PR-5187/92; AR-5878)
77 Ill. Adm. Code 1240 Financial & Economic Feasibility Review & Evaluation Plan (For All Long-Term Care & Chronic Disease Facilities (PR-5225/92; AR-5880))
77 Ill. Adm. Code 1235 Health Care Worker Self-Referral (E-432; O-3056) (P-683)
77 Ill. Adm. Code 1120 Health Facilities Planning Financial & Economic Feasibility Review (P-5205/92; RC-1244; A-4431)
77 Ill. Adm. Code 1130 Health Facilities Planning Procedural Rules (P-15321/92; A-4448) (P-4755/92; O-1242; R-5951; A-5882)
77 Ill. Adm. Code 1100 Narrative & Planning Policies (P-8144) (P-12606)
77 Ill. Adm. Code 1110 Processing, Classification Policies & Review Criteria (P-15328/92; A-4453) (P-8149) (P-12593)
RACING BOARD, ILLINOIS
11 Ill. Adm. Code 1428 Admissions & Credentials (P-3593; O-10011; M-12456; A-14049) (E-3683; O-6550; RC-10012)
11 Ill. Adm. Code 510 Claiming Races (P-4155; A-12423) (P-6746; A-13612)
11 Ill. Adm. Code 402 Concessionaire Rules (P-14087)
11 Ill. Adm. Code 1413 Entries, Subscriptions & Declarations (P-13218/92; A-1628) (P-14090)
11 Ill. Adm. Code 1411 Jockeys, Apprentices, Jockey Agents, & Valets (P-1372; A-12426) (P-14094)
11 Ill. Adm. Code 502 Licensing (P-11367)
11 Ill. Adm. Code 509 Medication (P-6955/92; A-3649)
11 Ill. Adm. Code 1409 Ownership, Partnership & Stable Name (P-4158; A-12429)
11 Ill. Adm. Code 205 Procedures for License Hearings (P-3594; A-13615)
11 Ill. Adm. Code 1440 Quarter Horse Racing (E-14181)
11 Ill. Adm. Code 1305 Racetrack Operators & Their Duties (P-2439/92; A-3034)
11 Ill. Adm. Code 1318 Racing Rules (P-12271)
11 Ill. Adm. Code 1424 Regulations for Meetings (P-12133/92; A-3038)
11 Ill. Adm. Code 205 Rules of Practice (P-3594) (E-6859; O-8085)
11 Ill. Adm. Code 1416 Rules of the Race (P-12274)
11 Ill. Adm. Code 1402 Stewards (P-11372)
11 Ill. Adm. Code 409 Trifecta (P-14565)
11 Ill. Adm. Code 1303 Violations (P-1728; A-12437)
REHABILITATION SERVICES, DEPARTMENT OF
89 Ill. Adm. Code 515 Advisory Councils (P-11378) (E-11589)
4 Ill. Adm. Code 300 Americans With Disabilities Act Grievance Procedure (A-15102/92; CC-1673)
89 Ill. Adm. Code 510 Appeals & Hearings (P-11380) (E-11608)
89 Ill. Adm. Code 557 Application (P-11382) (E-11652)
89 Ill. Adm. Code 553 Assessment for Determining Eligibility & Rehabilitation Needs (P-11384) (E-11657)
89 Ill. Adm. Code 897 Assistive Technology for Persons with Disabilities Tax Check Off Fund (E-6886)
89 Ill. Adm. Code 540 Auxiliary Aids (P-20088/92; A-6244) (PR-11386) (ER-11667)
89 Ill. Adm. Code 708 Case Transfers/Referrals (P-9852) (E-10003)
89 Ill. Adm. Code 562 Client Financial Participation (P-14189/92; A-3895) (P-11388) (E-11676)
89 Ill. Adm. Code 680 Client Responsibilities (P-943)

REHABILITATION SERVICES, DEPARTMENT OF (CONT'D)	
89 Ill. Adm. Code 617	Closure (P-11390) (E-11686)
89 Ill. Adm. Code 567	Comparable Benefits (P-10403/92; A-149) (P-11392) (E-11696)
89 Ill. Adm. Code 505	Confidentiality of Information (P-1731; A-9964)
89 Ill. Adm. Code 530	Criteria for the Evaluation of Programs of Services in Community Rehabilitation Programs (P-11394) (E-11701)
89 Ill. Adm. Code 552	Eligibility (PR-11396) (ER-11733)
89 Ill. Adm. Code 525	Grants & Contracts (P-947; A-9980)
89 Ill. Adm. Code 730	III. Center for Rehabilitation & Education/Community Residential Services for the Blind & Visually Impaired (P-11398) (E-11745)
89 Ill. Adm. Code 730	III. Visually Handicapped Institute (P-10397/92; A-425)
89 Ill. Adm. Code 1177	Impartial Hearing Officer Standards (P-11400) (E-11766)
89 Ill. Adm. Code 572	Individualized Written Rehabilitation Program (IWRP) (P-11402) (E-11770)
89 Ill. Adm. Code 602	Maintenance (PR-11404) (ER-11780)
89 Ill. Adm. Code 587	Medical, Psychological, & Related Services (P-952; W-3686) (PR-11406) (ER-11784)
89 Ill. Adm. Code 830	Non-Academic Programs & Policies (P-18759/92; A-6248)
89 Ill. Adm. Code 685	Non-Financial Eligibility (P-18947/92; A-6256)
89 Ill. Adm. Code 680	Other Client Responsibilities (P-943; A-7230)
89 Ill. Adm. Code 607	Other Services (PR-11408) (ER-11796)
89 Ill. Adm. Code 612	Placement (PR-11410) (ER-11801)
89 Ill. Adm. Code 622	Post-Employment Services (PR-11412) (ER-11804)
89 Ill. Adm. Code 690	Prescreening & Eligibility Determination Processes (P-15065/92; A-3675)
89 Ill. Adm. Code 827	Rules of Conduct (P-77; A-6260)
89 Ill. Adm. Code 657	Secondary Transitional Experience (PR-11414) (ER-11808)
89 Ill. Adm. Code 590	Services (P-11416) (E-11812)
89 Ill. Adm. Code 597	Tools, Equipment, Supplies & Initial Stock (PR-11420) (ER-11856)
89 Ill. Adm. Code 592	Training Services (P-1375; W-3687) (PR-11422) (ER-11864)
RETIREMENT SYSTEM OF THE STATE OF ILLINOIS, TEACHERS'	
80 Ill. Adm. Code 1650	Administration & Operation of the Teachers' Retirement System (P-12384/92; A-1631)
REVENUE, DEPARTMENT OF	
86 Ill. Adm. Code 210	Board of Appeals (E-665) (P-2718; C-3545; A-8860)
86 Ill. Adm. Code 1000	Disaster Relief (E-12445)
86 Ill. Adm. Code 105	Electronic Filing of Ill. Individual Income Tax Returns (P-219; A-7031) (E-445) (P-9854)
86 Ill. Adm. Code 100	Income Tax (P-222; A-8869) (E-473) (P-6619; A-13776) (P-6945) (P-9870) (A-14189) (P-15471)
86 Ill. Adm. Code 535	Nursing Home Grant Assistance Act (P-15340/92; A-3042)
86 Ill. Adm. Code 750	Payment of Taxes by Electronic Funds Transfer (P-8450)
86 Ill. Adm. Code 110	Property Tax/Revenue Act of 1939 (P-2507)
86 Ill. Adm. Code 1200	Public Information, Rulemaking & Organization (A-7054)
86 Ill. Adm. Code 130	Retailers' Occupation Tax (P-14554/92; A-860) (P-6955) (P-8461) (P-15501)
86 Ill. Adm. Code 530	Senior Citizens & Disabled Persons Property Tax Relief & Pharmaceutical Assistance Act (P-3104; A-11566)
86 Ill. Adm. Code 140	Service Occupation Tax (P-15515)

REVENUE, DEPARTMENT OF (CONT'D)	
86 Ill. Adm. Code 160	Service Use Tax (P-15522)
86 Ill. Adm. Code 150	Use Tax (P-14563/92; A-1947) (P-15527)
SAVINGS AND LOAN ASSOCIATIONS, COMMISSIONER OF	
38 Ill. Adm. Code 450	Residential Mortgage License Act of 1987 (P-17570/92; A-3513)
SAVINGS AND RESIDENTIAL FINANCE, COMMISSIONER OF	
4 Ill. Adm. Code 1100	Americans With Disabilities Act Grievance Procedure (P-13483/92; A-14653)
38 Ill. Adm. Code 1000	III. Savings & Loan Act of 1985 (Recodified) (A-4464)
38 Ill. Adm. Code 1050	Residential Mortgage License Act of 1987 (Recodified) (A-4475)
38 Ill. Adm. Code 1075	Savings Bank Act (P-2727; A-8894; RQ-11873)
SECRETARY OF STATE	
14 Ill. Adm. Code 150	Business Corporation Act (P-4167; A-11571)
92 Ill. Adm. Code 1040	Cancellation, Revocation or Suspension of Licenses or Permits (P-1747; A-8512) (P-2128; A-12782) (P-2856; A-9028)
80 Ill. Adm. Code 420	Department of Personnel (P-15342/92; A-1652)
23 Ill. Adm. Code 3030	III. Library System Act (P-9678) (E-9725) (P-12277) (E-12449)
92 Ill. Adm. Code 1070	III. Safety Responsibility Law (P-2863; A-8517)
92 Ill. Adm. Code 1030	Issuance of Licenses (P-956; A-8275) (E-1219) (P-1752; A-8522) (P-17229/92; A-2025) (P-12138/92; A-7065) (P-13661)
14 Ill. Adm. Code 178	Limited Liability Company Act (P-13672)
23 Ill. Adm. Code 3040	Literacy Grant Program (P-958; A-7234)
92 Ill. Adm. Code 1001	Procedures & Standards (1758; A-8528) (E-2047) (P-19761/92; A-6274)
2 Ill. Adm. Code 550	Public Information, Rulemaking, & Organization (A-9986)
14 Ill. Adm. Code 170	Revised Uniform Limited Partnership Act (P-13784/92; A-427)
1 Ill. Adm. Code 100	Rulemaking (P-2867; A-10414)
SPACE NEEDS COMMISSION	
3 Ill. Adm. Code 800	Placement of Monuments, Memorials & Statues on the Capitol Building Grounds (P-15828/92; A-6513)
3 Ill. Adm. Code 850	Space Utilization in the Capitol Complex (P-15832/92; A-6517)
STATE POLICE, DEPARTMENT OF	
20 Ill. Adm. Code 1230	Firearm Owner's Identification Act (P-7768)
20 Ill. Adm. Code 1285	Sample Collection for Genetic Marker Indexing (P-13981)
STATE POLICE MERIT BOARD	
80 Ill. Adm. Code 150	Procedures of the Department of State Police Merit Board (E-17372/92; RC-181; F-5952) (P-17959/92; A-9716; RQ-11895; EC-14684) (P-14568)
STUDENT ASSISTANCE COMMISSION, ILLINOIS	
23 Ill. Adm. Code 2731	Correctional Officer's Grant Program (P-1381)
23 Ill. Adm. Code 2720	Federal Family Education Loan Program (FFELP) (P-1403; A-10506)
23 Ill. Adm. Code 2700	General Provisions (P-1385; A-10541)
23 Ill. Adm. Code 2731	Grant Program for Dependents of Correctional Officers (P-1381; A-10559)

ILLINOIS REGISTER			ILLINOIS REGISTER		
CUMULATIVE INDEX			CUMULATIVE INDEX		
Vol. 17, Issue #39	September 24, 1993		Vol. 17, Issue #39	September 24, 1993	
STUDENT ASSISTANCE COMMISSION, ILLINOIS (CONT'D)			TREASURER (CONT'D)		
23 Ill. Adm. Code 2720	Guaranteed Loan Programs (P-1403) (E-2055)		80 Ill. Adm. Code 630	Conditions of Employment (P-6632; A-15123)	
23 Ill. Adm. Code 2730	Ill. National Guard Grant Program (P-1437; A-10563)		74 Ill. Adm. Code 750	Home Ownership Made Easy Act (PR-762; A-9079) (P-777; A-9081)	
23 Ill. Adm. Code 2733	Ill. Veteran Grant (IVG) Program (P-1444; A-10570)		74 Ill. Adm. Code 740	Ill. Public Treasurers' Investment Pool for Public Treasurers in the State of Ill. (P-585; A-6663)	
23 Ill. Adm. Code 2761	Merit Recognition Scholarship (MRS) Program (P-1453; A-10579)		80 Ill. Adm. Code 620	Merit & Fitness (P-91; W-869) (P-11724/92; W-869) (P-12409/92; W-869) (P-15347/92; A-4510)	
23 Ill. Adm. Code 2763	Minority Teachers of Ill. (MTI) Scholarship Program (E-175) (P-1459; A-10585)		80 Ill. Adm. Code 650	Rules of the Personnel Review Board (P-6635)	
23 Ill. Adm. Code 2735	Monetary Award Program (P-1470; A-10596) (E-6672) (P-10252)		74 Ill. Adm. Code 730	Smart Money Program Confidentiality Requirements (PP-1671; O-3057) (P-3831; A-9999)	
23 Ill. Adm. Code 2762	Paul Douglas Teacher Scholarship Program (P-1484; A-10611)				
23 Ill. Adm. Code 2732	Police Officer/Fire Officer Grant Program (P-1493; A-10620)				
23 Ill. Adm. Code 2760	State Scholar Program (P-1497; A-10624)				
23 Ill. Adm. Code 2770	Student to Student (STS) Program of Matching Grants (P-1505; A-10632)				
TOLL HIGHWAY AUTHORITY, ILLINOIS STATE			UNIVERSITY OF ILLINOIS, BOARD OF TRUSTEES OF THE		
92 Ill. Adm. Code 2520	State Toll Highway Rules (PR-566; AR-8536)		89 Ill. Adm. Code 1200	Program Content & Guidelines for Division of Specialized Care for Children (P-15354/92; A-1137) (P-7780; O-14188) (E-8052; W-8318) (E-9735; O-13198)	
92 Ill. Adm. Code 2520	State Toll Highway Rules (P-542; A-8539)				
TRANSPORTATION, DEPARTMENT OF			VETERANS' AFFAIRS, DEPARTMENT OF		
92 Ill. Adm. Code 451	Administrative Requirements for Official Testing Stations (P-3110; A-12839)		4 Ill. Adm. Code 325	Americans With Disabilities Act Grievance Procedure (A-8565/92; CC-1673)	
4 Ill. Adm. Code 750	Americans With Disabilities Act Grievance Procedure (A-11418/92; CC-1673)		2 Ill. Adm. Code 1270	Freedom of Information ((A-14659)	
92 Ill. Adm. Code 700	Construction in Floodways of Rivers, Lakes & Streams (P-17235/92; A-4484)				
92 Ill. Adm. Code 522	Control of Outdoor Advertising Adjacent to Primary & Interstate Highways (P-981; A-7258)				
92 Ill. Adm. Code 10	Disadvantaged, Minority & Woman-Owned Businesses (P-6418)				
92 Ill. Adm. Code 397	Driving & Parking (P-13686)		CARNIVAL-AMUSEMENT SAFETY BOARD		
92 Ill. Adm. Code 392	Driving of Motor Vehicles (P-13690)		Carnival & Amusement Ride Inspection Law; 56 Ill. Adm. Code 6000	451	
92 Ill. Adm. Code 600	Employee Commute Options (P-12613)				
92 Ill. Adm. Code 395	Hours of Service of Drivers (P-13693)		EDUCATION, STATE BOARD OF		
92 Ill. Adm. Code 396	Inspection, Repair & Maintenance (P-13699)		Public Schools Evaluation, Recognition & Supervision; 23 Ill. Adm. Code 1	10638	
92 Ill. Adm. Code 440	Minimum Safety Standards for Construction of Type I School Buses (P-15835/92; A-3530)				
92 Ill. Adm. Code 442	Minimum Safety Standards for Construction of Type II School Buses (P-15845/92; A-3540)		ENVIRONMENTAL PROTECTION AGENCY		
92 Ill. Adm. Code 67	Morris Municipal Airport Hazard Zoning (P-1767; A-9035)		Payment of Claims from the Underground Storage Tank Fund; 35 Ill. Adm. Code 876	681	
92 Ill. Adm. Code 390	Motor Carrier Safety Regs.: General (P-13986)		State Implementation Plan Submittal	15198	
92 Ill. Adm. Code 456	Nonscheduled Bus Inspections (P-13704)				
92 Ill. Adm. Code 393	Parts & Accessories Necessary for Safe Operation (P-13730)		FINANCIAL INSTITUTIONS, DEPARTMENT OF		
92 Ill. Adm. Code 386	Procedures & Enforcement (P-13734)		Ill. Credit Union Act; 38 Ill. Adm. Code 190	7560	
92 Ill. Adm. Code 391	Qualification of Drivers (P-13739)				
92 Ill. Adm. Code 454	Rates to be Charged by Official Testing Stations for Second Division Vehicles Other than School Buses (P-12278)		PUBLIC HEALTH, DEPARTMENT OF		
92 Ill. Adm. Code 704	Regulation of Public Waters (P-17244/92; A-4494)		Subacute Care Hospital Demonstration Program Code; 77 Ill. Adm. Code 270	14057	
92 Ill. Adm. Code 518	Relocation Assistance & Payments Program (P-12628)				
92 Ill. Adm. Code 77	Scott Joint-Use Airport Hazard Zoning (P-1789; A-9057)		PUBLIC HEALTH, DEPARTMENT OF/HEALTH FACILITIES PLANNING BOARD		
92 Ill. Adm. Code 453	Specifications for Seat Safety Belts (P-2186; A-8563)		Narrative & Planning Policies; 77 Ill. Adm. Code 1100 (Chicago)	14058	
92 Ill. Adm. Code 451	Vehicle Inspections (P-3110)		Narrative & Planning Policies; 77 Ill. Adm. Code 1100 (Springfield)	14059	
			Planning Policies; 77 Ill. Adm. Code 1100	10639	
			Processing, Classification Policies & Review Criteria; 77 Ill. Adm. Code 1110	10640	
			Processing, Classification Policies & Review Criteria; 77 Ill. Adm. Code 1110 (Chicago)	14060	
			Processing, Classification Policies & Review Criteria; 77 Ill. Adm. Code 1110 (Springfield)	14061	

PUBLIC INFORMATION (CONT'D)

POLLUTION CONTROL BOARD

Notice Pursuant to Ill. Rev. Stat. 1991, Ch. 111 1/2, Par. 1007.2(b) 872
Notice Pursuant to 415 ILCS 5/7.2(b) Contingency Plan Rules Pursuant to Section 22.7 6364
Notice Pursuant to Ill. Rev. Stat. 1991, Ch. 111 1/2, Par. 1007.2(b) 874
Contingency Plan Rules Pursuant to Section 22.7
Notice Pursuant to Ill. Rev. Stat. 1991, Ch. 111 1/2, Par. 1007.2(b)
RCRA Rules Pursuant to Section 22.4(a)
Notice Pursuant to Ill. Rev. Stat. 1991, Ch. 111 1/2, Par. 1007.2(b) 877
Notice Pursuant to Ill. Rev. Stat. 1991, Ch. 111 1/2, Par. 1007.2(b) 7081
Notice Pursuant to Ill. Rev. Stat. 1991, Ch. 111 1/2, Par. 1007.2(b) 11222
Notice Pursuant to Ill. Rev. Stat. 1991, Ch. 111 1/2, Par. 1007.2(b) 14203

REVENUE, DEPARTMENT OF

Index of Letter Rulings (3rd Quarter of 1992) (Income Tax) 3558
Index of Letter Rulings (4th Quarter 1992) (ROT) 6552
Index of Letter Rulings (4th Quarter 1992) (Income Tax) 6579
Index of Letter Rulings (1st Quarter 1993) (Income Tax) 7082
Index of Letter Rulings (1st Quarter 1993) (ROT) 11908
Index of Letter Rulings (2nd Quarter 1993) (Income Tax) 13200
Revocation of Letter Rulings 13216

REGULATORY AGENCY

REVENUE, DEPARTMENT OF
Retailers' Occupation Tax Act; 86 Ill. Adm. Code 130 10015

REGULATORY FLEXIBILITY ANALYSIS

COMMERCE AND COMMUNITY AFFAIRS, DEPARTMENT OF

Notice of Regulatory Flexibility Impact Analysis
1675, 3911, 6677, 6894, 7094, 8088, 8566, 10017, 10018, 10019, 10020, 11224, 11225, 11226, 11930, 13814, 13815, 13816, 13817, 14063, 14064, 14204, 14205, 14694, 14695, 14696,

JOINT COMMITTEE ON ADMINISTRATIVE RULES

AGENDA

Agenda for Meeting of January 12, 1993 510
Agenda for Meeting of February 17, 1993 1676
Agenda for Meeting of March 9, 1993 5953
Agenda for Meeting of April 13, 1993 6895
Agenda for Meeting of May 11, 1993 8567
Agenda for Meeting of June 15, 1993 11227
Agenda for Meeting of July 20, 1993

PUBLIC HEARINGS (CONT'D)

REVENUE, DEPARTMENT OF

Income Tax; 86 Ill. Adm. Code 100 10014
Income Tax; 86 Ill. Adm. Code 100 14692
Income Tax; 86 Ill. Adm. Code 100 15201

TRANSPORTATION, DEPARTMENT OF

Employee Commute Options; 92 Ill. Adm. code 600 13199

PUBLIC INFORMATION

BANKS & TRUST COMPANIES, COMMISSIONER OF

Notice of Acceptance of an Application by CNB Bancshares, Inc., Evansville, Indiana, to Acquire South Central Ill. Bancorp, Inc., Effingham, Ill. 2079
Notice of Acceptance of an Application by First of America Bank Corporation, Kalamazoo, Michigan, to Acquire Kewanee Investing Company, Inc., Kewanee, Ill. 2080
Notice of Acceptance of an Application by Mercantile Bancorporation, Inc., St. Louis, Missouri, to Acquire First National Bank of Flora, Florida, Ill. 2081
Notice of Acceptance of an Application for AMBANC Corp., Vincennes, Indiana, to Acquire Farmers' State Bank of Palestine, Palestine, Ill. 3557
Notice of Acceptance of an Application by Mercantile Bancorporation Inc., St. Louis, Missouri, to Acquire Mt. Vernon Bancorp, Inc., Mt. Vernon, Ill. 10641
Notice of Acceptance of an Application by Banc One Corporation, Columbus, Ohio, and Banc One Ill. Corporation, Springfield, Ill., to Acquire Mid States Bancshares, Moline, Ill. 14062

EDUCATION, STATE BOARD OF

State Plan for Fiscal Years 1993-95, Amendment 2082

ENVIRONMENTAL PROTECTION AGENCY

Listing of Derived Water Quality Criteria 507
Listing of Derived Water Quality Criteria 3907
Listing of Derived Water Quality Criteria 9146

FINANCIAL INSTITUTIONS, DEPARTMENT OF

Notice of Names of Persons Appearing to be Owners of Unclaimed Property Whose Last Known Addresses are in Certain States 6335

LABOR, DEPARTMENT OF

List of Contractors Prohibited From An Award Of A Contract Or A Subcontract For Public Works Projects 7080

LOTTERY, DEPARTMENT OF THE

List of Game-Specific Materials Published by the Lottery in 1992 870

JOINT COMMITTEE ON ADMINISTRATIVE RULES

AGENDA (CONT'D)

Agenda for Meeting of August 17, 1993

Agenda for Meeting of September 14, 1993

13638
14697

SECOND NOTICES RECEIVED

182, 517, 682, 878, 1245, 1682, 2096, 2442, 2520, 3065, 3566, 3690, 3912, 4520, 5958, 6366, 6551, 6678, 6901, 7095, 7561, 8086, 8319, 8577, 9154, 9754, 10021, 10642, 11233, 11931, 12457, 13224, 13645, 13818, 14065, 14206, 14703, 15203, 15734

NOTICES PURSUANT TO P.A. 87-823

ABANDONED MINED LANDS RECLAMATION COUNCIL

Abandoned Mined Lands Reclamation; 62 Ill. Adm. Code 2501
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 1500
Selection of Contractors & Consultants; 44 Ill. Adm. Code 1150

11932
11933
11934

AGING, DEPARTMENT ON

Access to Information of the Department on Aging; 2 Ill. Adm. Code 726
Community Care Program; 89 Ill. Adm. Code 240
Introduction; 89 Ill. Adm. Code 210
Older Americans Act Programs; 89 Ill. Adm. Code 230
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 725

10644
10645
10646
10647
10648

AGRICULTURE, DEPARTMENT OF

Anhydrous Ammonia, Low Pressure Nitrogen Solutions, Equipment, Containers, & Storage Facilities; 8 Ill. Adm. Code 215
Civil Administrative Code, Subpart A, Procedure for the Collection, Control & Distribution of Surety Bonds Received by the Director of the Ill. Department of Agriculture Acting as Trustee on Behalf of the Claimants; 8 Ill. Adm. Code 3
Egg & Egg Products Act; 8 Ill. Adm. Code 65
Fairs Operating Under the Agricultural Fair Act; 8 Ill. Adm. Code 260
Grain Insurance Act; 8 Ill. Adm. Code 285
Hatcheries, Poultry Flocks, & Produce Thereof; 8 Ill. Adm. Code 55
Humane Care For Animals Act; 8 Ill. Adm. Code 35
Ill. Fertilizer Act of 1961; 8 Ill. Adm. Code 210
Ill. State Fair & DuQuoin State Fair, Non-Fair Space Rental & the General Operation of the State Fairgrounds; 8 Ill. Adm. Code 270
Insect Pest & Plant Disease Act; 8 Ill. Adm. Code 240
Meat & Poultry Inspection Act; 8 Ill. Adm. Code 125
Organizational Chart, Description, Rulemaking Procedure, & Programs; 2 Ill. Adm. Code 700

7562

7563
7564
7565
7566
7567
7568
7569

7570
7571
7572

7573

NOTICES PURSUANT TO P.A. 87-823 (CONT'D)

AGRICULTURE, DEPARTMENT OF (CONT'D)

Pesticide Act of 1979; 8 Ill. Adm. Code 250
Public Grain Warehouse & Warehouse Receipts Act; 8 Ill. Adm. Code 505
Refrigerated Warehouses Act; 8 Ill. Adm. Code 515
Soil & Water Conservation Districts Act; 8 Ill. Adm. Code 650
Water Use Act of 1983; 8 Ill. Adm. Code 675

7576
7577
7578
7579
7580

ALCOHOLISM AND SUBSTANCE ABUSE, DEPARTMENT OF

Access to Information; 2 Ill. Adm. Code 1276
Licensure of Alcoholism & Substance Abuse Treatment, Intervention & Research Programs; 77 Ill. Adm. Code 2058
Research; 77 Ill. Adm. Code 2085

12458
12459
12460
12461

Rules of Practice & Procedure in Administrative Hearings; 77 Ill. Adm. Code 2000

ATTORNEY GENERAL

Compliance With the Freedom of Information Act; 2 Ill. Adm. Code 576
Rulemaking & Organization; 2 Ill. Adm. Code 575

11935
11936

AUDITOR GENERAL, OFFICE OF THE

Code of Rules; 74 Ill. Adm. Code 440
Freedom of Information; 2 Ill. Adm. Code 601
Post Audit Guidelines; 74 Ill. Adm. Code 470
Public Information, Rulemaking & Organization & Personnel; 2 Ill. Adm. Code 600

10649
10650
10651
10652

BANKS AND TRUST COMPANIES, COMMISSIONER OF

Hearings Before the Commissioner of Banks & Trust Companies; 38 Ill. Adm. Code 392
Hearings for Removal of Directors, Officers, Employees or Agents of a State Bank; 38 Ill. Adm. Code 900
Loan Agreements Providing for a Bank to Share in Profits, Income or Earnings; 38 Ill. Adm. Code 350
Powers Incidental & Germane to Carrying on a General Banking Business; 38 Ill. Adm. Code 320

9756
9757
9758
9759

CENTRAL MANAGEMENT SERVICES, DEPARTMENT OF

Access to Information; 2 Ill. Adm. Code 751
General Provisions; 80 Ill. Adm. Code 304
Public Information; 2 Ill. Adm. Code 750
Standard Procurement; 44 Ill. Adm. Code 1
State of Ill. Medical Care Assistance Plan; 80 Ill. Adm. Code 2120
State of Ill. Premium Payment Plan; 80 Ill. Adm. Code 2100

8579
8580
8581
8582
8583
8584

CHILDREN AND FAMILY SERVICES, DEPARTMENT OF

Licensing Enforcement; 89 Ill. Adm. Code 383
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 775

11235
11236

NOTICES PURSUANT TO P.A. 87-823 (CONT'D)

COMMERCE AND COMMUNITY AFFAIRS, DEPARTMENT OF Low Income Home Energy Assistance Program; 47 Ill. Adm. Code 100 Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 800 Review & Appeal Procedures; 47 Ill. Adm. Code 10 Service Delivery System & State Responsibilities; 56 Ill. Adm. Code 2600 State Administration of the Federal Community Services Block Grant Program; 47 Ill. Adm. Code 10026 Training Services for the Disadvantaged; 56 Ill. Adm. Code 2610	10022 10023 10024 10025 10026 10027
COMMERCE COMMISSION, ILLINOIS Access to Information; 2 Ill. Adm. Code 1701 Least-Cost Planning for Electric Utilities; 83 Ill. Adm. Code 440 Least-Cost Planning for Natural Gas Utilities; 83 Ill. Adm. Code 535 Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 1700 Rules of Practice; 83 Ill. Adm. Code 200	9125 9126 9127 9128 9129
COMMUNITY COLLEGE BOARD, ILLINOIS Public Access to Information; 2 Ill. Adm. Code 5176 Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 5175	6903 6904
COMPTROLLER Access to Information; 2 Ill. Adm. Code 625 Merit Commission rules; 80 Ill. Adm. Code 100 Personnel Rules; 80 Ill. Adm. Code 500 Rules of Practice in Administrative Hearings; 74 Ill. Adm. Code 310	11237 11238 11239 11240
CONSERVATION, DEPARTMENT OF Dept. Formal Hearings Conducted for Rulemaking & Contested Cases; 17 Ill. Adm. Code 2530 Non-Departmental Archaeological Research on Dept. of Conservation Managed Lands; 17 Ill. Adm. Code 390 Protection & Archaeological Resources; 17 Ill. Adm. Code 370 Rulemaking & Organization; 2 Ill. Adm. Code 825	8089 8090 8091 8092
CORRECTIONS, DEPARTMENT OF Americans With Disabilities Act Grievance Procedure; 4 Ill. Adm. Code 475 Freedom of Information; 2 Ill. Adm. Code 851 Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 850	10028 10029 10030
CRIMINAL JUSTICE INFORMATION AUTHORITY, ILLINOIS Operating Procedure for the Administration of Federal Funds; 20 Ill. Adm. Code 1520	11937
EAST ST. LOUIS COMMUNITY COLLEGE, BOARD OF TRUSTEES OF Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 5100 State Community College of East St. Louis; 23 Ill. Adm. Code 1600	11938 11939
EDUCATION, STATE BOARD OF Access to Information of the State Board of Education Under the Freedom of Information Act; 2 Ill. Adm. Code 5001 Contested Cases & Other Formal Hearings; 23 Ill. Adm. Code 475 Driver Education; 23 Ill. Adm. Code 252 Health Examinations & Immunizations; 23 Ill. Adm. Code 625 Hearings Before the State Teacher Certification Board; 23 Ill. Adm. Code 480 Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 5000 Vocational Education; 23 Ill. Adm. Code 254	9130 9131 9132 9133 9134 9135 9136
EDUCATIONAL FACILITIES AUTHORITY, ILLINOIS Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 5200	9760
EMPLOYMENT SECURITY, DEPARTMENT OF Administrative Hearings & Appeals; 56 Ill. Adm. Code 2725 Freedom of Information; 2 Ill. Adm. Code 1301 General Provisions; 56 Ill. Adm. Code 2960	9137 10031 9138
ENVIRONMENTAL PROTECTION AGENCY Procedures for Contested Case Hearings; 35 Ill. Adm. Code 168 Procedures for Informational & Quasi-Legislative Public Hearings; 35 Ill. Adm. Code 164 Procedures for Permit & Closure Plan Hearings; 35 Ill. Adm. Code 166 Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 1825 Technical Policy Statements; 35 Ill. Adm. Code 653	8321 8322 8323 8324 11940
ETHICS, BOARD OF Freedom of Information; 2 Ill. Adm. Code 1601 Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 1600	8093 8094
FARM DEVELOPMENT AUTHORITY, ILLINOIS Ill. Farm Development Authority; 8 Ill. Adm. Code 1400	11241
FINANCIAL INSTITUTIONS, DEPARTMENT OF Consumer Installment Loan Act; 83 Ill. Adm. Code 110 Financial Institutions Code; 38 Ill. Adm. Code 200 Formulation & Issuance of Schedules of Maximum Rates for Check Cashing & the Writing of Money Orders of Community & Ambulatory Currency Exchanges, The; 38 Ill. Adm. Code 125 Schedules of Maximum Rates to be Charged for Check Cashing & Writing of Money Orders by Community & Ambulatory Currency Exchanges; 38 Ill. Adm. Code 130 Title Insurance Act; 50 Ill. Adm. Code 8100	7100 7101 7102 7103 7104
GOVERNOR'S PURCHASED CARE REVIEW BOARD Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 1850	7581

NOTICES PURSUANT TO P.A. 87-823 (CONT'D)

LABOR, ILLINOIS DEPARTMENT OF
Health & Safety; 56 Ill. Adm. Code 350
Ill. Child Labor Law; 56 Ill. Adm. Code 250
Nurse Agency Licensing Act; 68 Ill. Adm. Code 690
Prevailing Wage Hearing Procedures; 56 Ill. Adm. Code 100
Rules & Regs. Relating to the Regulations of Private Employment Agencies; 68 Ill. Adm. Code 689709
Six Day Week Law; 56 Ill. Adm. Code 220

LABOR RELATIONS BOARDS, ILLINOIS STATE/LOCAL
Five-Year Evaluation of All Existing Rules; 2 Ill. Adm. Code 2500
Hearing Procedures; 80 Ill. Adm. Code 1105
Public Information, Rulemaking, Organization & Personnel; 2 Ill. Adm. Code 1675
Unfair Labor Practice Procedures; 80 Ill. Adm. Code 1120

LEGISLATIVE INFORMATION SYSTEM
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 150

LEGISLATIVE REFERENCE BUREAU
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 200

LEGISLATIVE TRAVEL CONTROL BOARD
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 225

LIQUOR CONTROL COMMISSION
Ill. Liquor Control Commission, The; 11 Ill. Adm. Code 100
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 2075

LOTTERY, DEPARTMENT OF THE
Hearing Rules (Transferred); 11 Ill. Adm. Code 1600
Hearings; 11 Ill. Adm. Code 1700
Lottery (General); 11 Ill. Adm. Code 1770
Procedural Rules (Deleted); 11 Ill. Adm. Code 1635

MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES, DEPARTMENT OF
Family Assistance & Home-Based Support Programs for Persons with
Mental Disabilities; 59 Ill. Adm. Code 117
Freedom of Information; 2 Ill. Adm. Code 1026
Medicaid Community Mental Health Services Program; 59 Ill. Adm. Code 132
Minimum Standards for Certification of Developmental Training Programs;
59 Ill. Adm. Code 119
Minimum Standards for Licensure of Community Residential Alternatives;
59 Ill. Adm. Code 113
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 1025

NOTICES PURSUANT TO P.A. 87-823 (CONT'D)

GUARDIANSHIP AND ADVOCACY COMMISSION
Fee Schedule for the Office of the State Guardian; 59 Ill. Adm. Code 301
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 1875

HEALTH FACILITY AUTHORITY, ILLINOIS
Access to Information; 2 Ill. Adm. Code 1901
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 1900

HIGHER EDUCATION, BOARD OF
Access to Public Information; 2 Ill. Adm. Code 5051
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 5050

HOUSING DEVELOPMENT AUTHORITY, ILLINOIS
Access to Public Records for the Ill. Housing Development Authority; 2 Ill. Adm. Code 1976

HUMAN RIGHTS COMMISSION, ILLINOIS
Procedural Rules; 56 Ill. Adm. Code 5300
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 2000

HUMAN RIGHTS, DEPARTMENT OF
Access to Information; 2 Ill. Adm. Code 926
Procedural; 56 Ill. Adm. Code 2520
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 925

INDUSTRIAL COMMISSION, ILLINOIS
Freedom of Information Act; 2 Ill. Adm. Code 2026
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 2025

INSURANCE, DEPARTMENT OF
Access to Public Records; 2 Ill. Adm. Code 951

JOINT COMMITTEE ON ADMINISTRATIVE RULES
Complaint Review; 1 Ill. Adm. Code 260
Expedited Corrections; 1 Ill. Adm. Code 245
Five-Year Evaluation of All Existing Rules; 1 Ill. Adm. Code 250
General Policies; 1 Ill. Adm. Code 210
Review of Emergency Rulemaking; 1 Ill. Adm. Code 230
Review of Peremptory Rulemaking; 1 Ill. Adm. Code 240
Review of Proposed Rulemaking; 1 Ill. Adm. Code 220

JUDGES RETIREMENT SYSTEM
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 325

NOTICES PURSUANT TO P.A. 87-823 (CONT'D)

PUBLIC HEALTH, DEPARTMENT OF (CONT'D)
Recreational Area Code; 77 Ill. Adm. Code 800 11249
Regional Perinatal Health Care Code; 77 Ill. Adm. Code 640 11250
Rules & Regs. to Carry Out Provisions of Titles XVIII & XIX of the Social Security Act Relating to Skilled Nursing & Intermediate Care Facilities; 77 Ill. Adm. Code 420 11251
Rules of Practice & Procedure in Administrative Hearings; 77 Ill. Adm. Code 100 11252
Rules of Practice & Procedure in Administrative Hearings Held Pursuant to Sections 2-110(d) & 3-410 of the Nursing Home Care Reform Act of 1979; 77 Ill. Adm. Code 430 11253
Standards for Approval of Milk Laboratories; 77 Ill. Adm. Code 463 11254
Testing of Breath, Blood & Urine for Alcohol &/or Other Drugs; 77 Ill. Adm. Code 510 11255
WIC Vendor Management Code; 77 Ill. Adm. Code 672 11256

PUBLIC HEALTH, DEPARTMENT OF/HEALTH FACILITIES PLANNING BOARD
Appropriateness Review; 77 Ill. Adm. Code 1250 11257
Criteria & Procedure for Recognition of Area Wide Health Planning Organizations for Health Facilities Planning; 77 Ill. Adm. Code 1170 11258
Health Facilities Planning Procedural Rules; 77 Ill. Adm. Code 1130 11259
Practice & Procedure in Administrative Hearings; 77 Ill. Adm. Code 1180 11260
Processing, Classification Policies & Review Criteria; 77 Ill. Adm. Code 1110 11944
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 1925 11261

REGENTS, BOARD OF
Joint Rules of the Board of Regents, the Board of Governors of State Colleges & Universities, the Board of Trustees of the University of Ill., & the Board of Trustees of Southern Ill. University; Procurement & Bidding, The; 44 Ill. Adm. Code 525 7105
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 5075 7106

REHABILITATION SERVICES, DEPARTMENT OF
Access to Public Records; 2 Ill. Adm. Code 1176 9142
Public Information, Rulemaking, Department Organization; 2 Ill. Adm. Code 1175 9143

REVENUE, DEPARTMENT OF
Freedom of Information; 2 Ill. Adm. Code 1201 10038
Practice & Procedure for Hearings Before the Ill. Department of Revenue; 86 Ill. Adm. Code 20010039

RURAL BOND BANK, ILLINOIS
General Rules; 47 Ill. Adm. Code 400 14067

SAVINGS AND RESIDENTIAL FINANCE, COMMISSIONER OF
Ill. Savings & Loan Act of 1985; 38 Ill. Adm. Code 1000 14207
Residential Mortgage License Act of 1987; 38 Ill. Adm. Code 1050 14208
Savings & Loan Board; 38 Ill. Adm. Code 500 14209

SECRETARY OF STATE
Business Corporation Act; 14 Ill. Adm. Code 150 8330
Commercial Driver Training Schools; 92 Ill. Adm. Code 1060 9761

NOTICES PURSUANT TO P.A. 87-823 (CONT'D)

MILITARY AFFAIRS, DEPARTMENT OF
Freedom of Information Procedures; 2 Ill. Adm. Code 1376 8588
Rulemaking Procedures & Department Organization; 2 Ill. Adm. Code 1375 8589

MINES & MINERALS, DEPARTMENT OF
Freedom of Information Rules; 2 Ill. Adm. Code 1051 9139
Ill. Oil & Gas Act, The; 62 Ill. Adm. Code 240 9140
Ill. Surface Coal Mining Operations; 62 Ill. Adm. Code 280 9141

NATURES PRESERVES COMMISSION
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 2150 8097

NUCLEAR SAFETY, DEPARTMENT OF
Administrative Hearings; 32 Ill. Adm. Code 200 10034
Americans With Disabilities Act Grievance Procedure; 4 Ill. Adm. Code 175 10035
Freedom of Information Procedures; 2 Ill. Adm. Code 1076 10036
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 1075 10037

PROFESSIONAL REGULATION, DEPARTMENT OF
Access to Information; 2 Ill. Adm. Code 1326 7594
Clinical Social Work & Social Work Practice Act; 68 Ill. Adm. Code 1470 7595
Funeral Directors and Embalmers Act; 68 Ill. Adm. Code 1250 7596
Medical Practice Act of 1987; 68 Ill. Adm. Code 1285 7597
Nursing Home Administrators Licensing & Disciplinary Act; 68 Ill. Adm. Code 1310 7598
Optometric Practice Act of 1987; 68 Ill. Adm. Code 1320 7599
Real Estate License Act of 1983; 68 Ill. Adm. Code 1450 7601
Rules of Practice in Administrative Hearings; 68 Ill. Adm. Code 1110 7602

PUBLIC AID, DEPARTMENT OF
Freedom of Information; 2 Ill. Adm. Code 1101 8327
Practice in Administrative Hearings; 89 Ill. Adm. Code 104 8328
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 1100 8329

PUBLIC COUNSEL, OFFICE OF THE
Freedom of Information; 2 Ill. Adm. Code 2701 8590
Organization, Rulemaking & Public Access; 2 Ill. Adm. Code 2700 8591

PUBLIC HEALTH, DEPARTMENT OF
Ambulatory Surgical Treatment Center Licensing Requirements; 77 Ill. Adm. Code 205 11242
Driver License Medical Advisory Board; 77 Ill. Adm. Code 525 11243
Freedom of Information; 2 Ill. Adm. Code 1126 11244
Grade A Pasteurized Milk & Milk Products; 77 Ill. Adm. Code 775 11245
Ill. Home Health Agency Code; 77 Ill. Adm. Code 245 11246
Preventative Health & Health Services Block Grant Programs; 77 Ill. Adm. Code 960 11247
Public Information, Rulemaking & Organization Code; 2 Ill. Adm. Code 1125 11248

NOTICES PURSUANT TO P.A. 87-823 (CONT'D)

SECRETARY OF STATE (CONT'D)	
Departmental Duties; 2 Ill. Adm. Code 552	8331
Department of Personnel; 80 Ill. Adm. Code 420	8332
Merit Commission; 80 Ill. Adm. Code 50	8592
Merit Commission, Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 555	8593
Freedom of Information; 2 Ill. Adm. Code 551	8333
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 550	8334
Regs. Under the Ill. Securities Law of 1953; 14 Ill. Adm. Code 130	10040
SOUTHERN ILLINOIS UNIVERSITY, BOARD OF TRUSTEES OF	
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 5125	8335
STATE COLLEGES AND UNIVERSITIES, BOARD OF GOVERNORS OF	
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 5025	7107
STATE EMPLOYEES' RETIREMENT SYSTEM OF ILLINOIS	
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 2375	8336
STATE POLICE, DEPARTMENT OF	
Law Enforcement Agencies Data Systems (LEADS); 20 Ill. Adm. Code 1240	11945
STATE'S ATTORNEYS APPELLATE PROSECUTOR, OFFICE OF THE	
Freedom of Information (Transferred); 2 Ill. Adm. Code 301	8594
Freedom of Information; 2 Ill. Adm. Code 351	8595
Public Information, Rulemaking & Organization (Transferred); 2 Ill. Adm. Code 300	8596
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 350	8597
TRANSPORTATION, DEPARTMENT OF	
Construction & Maintenance of Dams; 92 Ill. Adm. Code 702	8337
Floodway Construction in Northeastern Ill.; 92 Ill. Adm. Code 708	8338
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 1225	8339
Rates To Be Charged By Official Testing Stations For	
Second Division Vehicles Other Than School Buses; 92 Ill. Adm. Code 454	8340
Request for Public Records; 2 Ill. Adm. Code 1226	8341
Rochelle Municipal Airport Hazard Zoning Regs.; 92 Ill. Adm. Code 76	8342
Rulemaking Procedures; 92 Ill. Adm. Code 102	8343
TREASURER, OFFICE OF THE STATE	
Access to Information; 2 Ill. Adm. Code 651	7108
General Provisions; 80 Ill. Adm. Code 640	7109
UNIVERSITIES CIVIL SERVICES SYSTEM, STATE	
Public Information, Rulemaking & Organization; 2 Ill. Adm. Code 5350	9145

EXECUTIVE ORDERS AND PROCLAMATIONS

EXECUTIVE ORDERS	
92-7 Sexual Harassment in State Agencies	518
93-1 An Executive Order Reorganizing Divisions Within The Department of State Police	3692
93-2 Executive Order On Implementation Of Task Force's Re-Evaluation Of Illinois Social Service Programs	4521
93-3 Executive Order Creating The Office Of Inspector General At The Department Of Children And Family Services	7110
93-4 Major Disaster Counties/Income Tax Extension/Motor Fuel Tax Act Licensing Or Permits Suspended	12466
93-4 Amendment to Executive Order Number Four (1993) Regarding The Great Flood of 1993	13648
93-5 Emergency Financing Powers In Connection With The Great Flood Of 1993	14210
93-6 Family Preservation Task Force	15738

PROCLAMATIONS

92-554 Dave Magee Day	185
92-555 Robert Beckwith Day	185
92-556 Arnold Kanter Day	186
92-557 Florsheim Shoe Company Year	186
92-558 Afro-American History Month	187
92-559 American History Month	187
92-560 Centennial Date For The Village of Cary, Illinois	188
92-561 Dominican Sisters of Springfield, Illinois Recognized	188
92-562 Phi Delta Kappa Presentation	189
92-563 Veterinary Medical Education Week	189
92-564 Santa's Secretaries Days	190
92-565 Phil Georger Day	524
92-566 Red Cloud Native American Week	525
93-001 Autism Week	879
93-002 George Pradel Day	879
93-003 Lewis University Year	880
93-004 School Social Work Week	880
93-005 Ernest R. Jenkins Day	881
93-006 Land Surveyors' Month	1247
93-007 Quincy Salvation Army/100th Birthday	1247
93-008 Dr. Martin Luther King Day	1247
93-009 Operation Uplift Day	1248
93-010 Mid-America Housing Expo Days	1248
93-011 Child Abuse Awareness Day	1683
93-012 Cardiac Rehabilitation Week	1683
93-013 Seed Month	1684
93-002 George Pradel Day (Revised)	2097
93-014 Activity Professionals Day	2097
93-015 Black Data Processing Associates Day	2098
93-016 Braille Literacy Week	2098
93-017 Sales and Marketing Month	2099

PROCLAMATIONS (CONT'D)

93-018	Mike Fisher Day	2099
93-019	Brookfield Centennial Celebration Year	2100
93-020	Financial Aid Awareness Month	2100
93-021	Girls and Women in Sports Day	2101
93-022	Snowmobile Safety Week	2101
93-023	Travel Agent Appreciation Week	2102
93-024	Women's Reproductive Health Day	2102
93-025	Little City Foundation-World's Largest Indoor Super Bowl Party Day	2102
93-026	Catholic Schools Week/Catholic Schools Appreciation Day	2103
93-027	Park Ridge Community Church Sesquicentennial Day	2103
93-028	Music In Our Schools Day	2444
93-029	Engineers Week	2444
93-030	Future Business Leaders Of America-Phi Beta Lambda Week	2444
93-031	Melba Johnson Day	2445
93-032	Nutrition Month	2446
93-033	Black Nurses' Day	2446
93-034	Child Passenger Safety Awareness Week	2446
93-035	Lithuanian Independence Day	2521
93-036	FFA Week	2521
93-037	Jaycee Child Identification Day	2522
93-038	Frank W. Considine Day	3066
93-039	Long-Term Care Administrators	3066
93-040	Nursing Home Week	3067
93-041	Agriculture Day	3567
93-042	DuSable Museum of African American History Day	3567
93-043	Licensed Practical Nurse Week	3568
93-044	Gold Heart Day	3569
93-045	Rural Electric And Telephone Youth Day	3569
93-046	David Cray Day	3570
93-047	Lewis And Clark Month (Revised)	3570
93-048	Youth Art Month	3571
93-049	Business Opportunity Days	3571
93-050	Dr. Charles Richard Drew Center For Health Sciences Continuing Education Day	3571
93-051	Free Paper Week	3572
93-052	Lutheran Schools Week	3572
93-053	Motorcycle Awareness Month	3573
93-054	Sarah Siddons Society Day	3573
93-055	Sertoma National Heritage Freedom Week	3574
93-056	Tornado Preparedness Week	3574
93-057	AFS Host Family Recognition Week	3693
93-058	Chronic Fatigue Syndrome Awareness Month	3694
93-059	Estonian Independence Day	3694
93-060	Foreign Language Week	3695
93-061	Hispanic Professional Engineers Days	3695

PROCLAMATIONS (CONT'D)

93-062	Human Services Week	3696
93-063	Illinois State Quartet Convention Week	3696
93-064	Independent Order of Foresters Day	3696
93-065	Jewish Culture Week	3697
93-066	Lioness Caramel Day	3697
93-067	Mt. Sinai Parenting Institute Day	3698
93-068	St. David's Day	3698
93-069	Federal Employee Of The Year Day	3699
93-070	U.S. Savings Bond Campaign Month	3699
93-071	Women's History Month	3700
93-072	Casimir Pulaski Day	3700
93-073	Midwest Area Of The Second Air Division Of The Eighth Air Force, World War II Days	3701
93-074	Denysia Bastus Day	3701
93-075	Dare Night With The Ambush	3913
93-076	U.S. Surgeon General's Hispanic/Latino Health Initiative Days	3913
93-077	Biomedical Equipment Technology Week	3913
93-078	Carthage High School Bluegirls Day	3914
93-079	Industry Appreciation Day	3915
93-080	Metropolitan Pier And Exposition Authority Employee Longevity Day	3915
93-081	Multiple Sclerosis Awareness Day	3916
93-082	La Petite Delta Day	5974
93-083	Mother of the Year Day	5974
93-084	Danube-Swabian Society of Chicago 40th Anniversary Day	5975
93-085	Drinking Water Week	5975
93-086	Illinois Day For Children	5976
93-087	Irish-American Heritage Month and St. Patrick's Day	5976
93-088	Lake and Watershed Management Month	5977
93-089	Professional Security Education Month	5977
93-090	STD Awareness Month	5978
93-091	Doctor's Day	5978
93-092	Eye Donor Awareness Month	5979
93-093	Tony Romano Day	5979
93-094	Tree City USA Month	5980
93-095	American POW Recognition Day	5980
93-096	International Week	5981
93-097	Police-Community Partnership Week	5981
93-098	Senior 100 Honorary Day	5981
93-099	Contemporary Christian Music Month	5982
93-100	Emergency Medical Services Week	5982
93-101	Illinois Community College Month	5983
93-102	Professional Social Workers Month	5983
93-103	Volunteer Week	5984
93-104	Manny Weincord Day	6367
93-105	American Red Cross Month	6367
93-106	Army ROTC Week	6368

PROCLAMATIONS (CONT'D)

93-107 Breastfeeding Promotion Month	6368
93-108 Building Safety Week	6369
93-109 Call Before You Dig Month	6369
93-110 Chicago Reporter Congratulated	6370
93-111 Community Renewal Society Day	6370
93-112 Greek Independence Day	6593
93-113 Infant Welfare Society Day	6593
93-114 Mary Parsons Waters Day	6594
93-115 Nancy Beyer Day	6594
93-116 Nurses Week	6595
93-117 Student-Athlete Day	6595
93-118 Sexual Assault Awareness Month	6596
93-119 Preschool Immunization Week	6596
93-120 Arbor And Bird Day	6679
93-121 Disaster Areas - Calhoun, Henry, Jersey And Rock Island Counties	6905
93-122 Disaster Areas - Kane, Lake And McHenry Counties	6905
93-123 National Federation Of Independent Business Day	7111
93-124 National Crime Victim Rights Week	7112
93-125 "Just Say No" Week	7603
93-126 Stamp Collecting Week	7604
93-127 Retired Teachers Week	8098
93-128 Disaster Areas - Jackson And Alexander Counties	8344
93-129 National Association Of Insurance Women's Week	8344
93-130 Correctional Officer Week	9156
93-131 Polish Constitution Day	9156
93-132 Michael Jordan's Restaurant Day	9157
93-133 Cando Day	9158
93-134 Cytotechnology Day	9158
93-135 Fresh Fruit And Vegetable Month	9159
93-136 James W. Compton Day	9159
93-137 RP Awareness Day	9160
93-138 American Heart Association Day	9161
93-139 Charleston Area Senior Center Day	9161
93-140 Frozen Yogurt Month	9162
93-141 Girl Scout Troop 222 Week	9162
93-142 Korean Veterans Of Foreign Wars	9163
93-143 Mattoon Area Senior Center Day	9163
93-144 Mother's Day	9164
93-145 Illinois Derby Day	9164
93-146 Paul M. Harmon Jr. Day	9165
93-147 Disaster Areas - Alexander, Massac, Pope And Pulaski Counties	9762
93-148 Disaster Areas - Cook And DuPage Counties	9762
93-149 Great Lakes Naval Training Center Should Be Retained And Fully Used	9763
93-150 Operation Lifesaver Awareness Day	9763
93-151 Copernicus Foundation Day	9764
93-152 AIDS Awareness Week	9765

PROCLAMATIONS (CONT'D)

93-153 American Industrial Hygiene Association Day	9765
93-154 Chicago Academy For The Arts' Tribute To Jule Styne Day	9766
93-155 Children's Memorial Day	9766
93-156 Cornelia de Lange Awareness Day	9767
93-157 Maritime Day	9768
93-158 Real Estate Education Week	9768
93-159 Safe Kids America Week	9769
93-160 Senior Center Year	9769
93-160 Senior Center Year (Revised)	14214
93-161 Flag Celebration Week	9770
93-162 Gateway Foundation Day	9770
93-163 Greek Heritage Week	9771
93-164 Illinois Agricultural Youth Institute Days	9771
93-165 National Nurses Society On Addiction Days	9772
93-166 Religious Freedom Day	9773
93-167 Safety Week	9773
93-168 Turkey Lover's Month	9774
93-169 Women In The Know...Export Week	9774
93-170 Youth Temperance Education Week	9775
93-171 Enterprise Zone Week	9775
93-172 National Depressive And Manic-Depressive Association Week	9776
93-173 William Rainey Harper College Board of Trustees Acknowledged	9776
93-174 Illinois Rivers Appreciation Month	9777
93-175 Joint Civic Committee Of Italian Americans Day	9778
93-176 Illinois Bell Operator Day	9778
93-177 Karen Carlson Day	9779
93-178 Genealogy Month	10041
93-179 Week of the High Risk Child	10041
93-180 Reverend Addie Wyatt Day	10042
93-181 Women Employed Day	10042
93-182 40 And 8 Week	10043
93-183 George J. Cheung Appreciation Day	10043
93-184 Israel Bonds Week	10044
93-185 Korean War 40th Anniversary Day of Observance	10044
93-186 Management Week	10045
93-187 Russell Maryland Day	10045
93-188 Safe Boating Week	10046
93-189 Burl And Louise Chronister Day	10046
93-190 Cancer Survivor Day	10047
93-191 Gwendolyn Brooks Day	10047
93-192 Certified Manager Day	10048
93-193 International Alliance Of Theatrical Stage Employees And Moving Picture Machine Operators	10049
93-194 Unclaimed Property Week	12467
93-194 Unclaimed Property Week (Revised)	12467
93-195 Father's Day	10050
93-196 Bassmaster Superstars Day	10051

PROCLAMATIONS (CONT'D)

93-197 Illinois Law Enforcement Torch Run For Special Olympics Recognition Week	10051
93-198 Architecture In Illinois Days	10052
93-199 Chestnut, Geo-Center Of Illinois Day	10052
93-200 Genealogical Society Founders Day	10053
93-201 Police Week	10053
93-202 Bill Miller Day	10054
93-203 Farmersville Day	10054
93-204 Chemistry Week	10055
93-205 Congregation B'Nai Jehoshua Bath Elohim Congratulated	10055
93-206 Danville High School "Contemporaries"/1994 "Allied Musical Salute To Liberation Of France"	10056
93-207 Real Men Cook Day	10056
93-208 WIC Week	10057
93-209 American GI Forum Days	10058
93-210 Amateur Radio Week	10058
93-211 Family Life Week	10059
93-212 Robert Dachman Day	10059
93-213 Sri Chinmoy Peace Days	10060
93-214 93rd Illinois Volunteer Infantry Day	10060
93-215 Home Education Week	10067
93-216 Economic Education Awareness Day	10058
93-217 Holocaust Commemoration Month	10059
93-218 Logistics Week	10060
93-219 Medical Assistants Week	10061
93-220 Medical Laboratory Week	10061
93-221 Sky Awareness Week	10062
93-222 Week Of The Young Child	10062
93-223 Child Abuse Prevention Month	10063
93-224 Cinco De Mayo Day	10064
93-225 Coal Awareness Week	10064
93-226 Drazo Mikhailovich Day	10065
93-227 Foster Parent Appreciation Month	10065
93-228 Junior High Student Government Month	10066
93-229 Long-Term Care Nurses Week	10066
93-230 Professional Secretaries Week/Professional Secretaries Day	10067
93-231 Certified Nurse Assistant Day	10067
93-232 Golden Gloves Day	10068
93-233 Harold Washington Day	10068
93-234 Lifeline Pilots Month	10069
93-235 Organ And Tissue Donor Awareness Week	10070
93-236 Gamma Phi Circus Week	10071
93-237 Queen Isabella Day	10071
93-238 HIV Talk Radio Day	
93-239 36th Infantry Division Day	
93-240 Alcohol Awareness Month	
93-241 Irvine L. Manning Day	
93-242 Public Health Month	

PROCLAMATIONS (CONT'D)

93-243 Surgical Technologists Week	10672
93-244 Telephone Operators' Week	10672
93-245 Asian And Pacific American Heritage Month	10673
93-246 Credit Education Week	10674
93-247 Day Of Remembrance Of The Victims Of The Holocaust	10674
93-248 Days Of Remembrance Of The Victims Of The Holocaust	10674
93-249 Dental Laboratory Technicians Week	10675
93-250 Rich Ludolph Day	10675
93-251 School Psychologists Association Week	10676
93-252 A Time To Shine: A Tribute To Health Care Volunteers Day	11262
93-253 Dinner Of Champions Day	11262
93-254 Internal Audit Month	11263
93-255 Buckle Up Kids Month	11263
93-256 Egg Month	11264
93-257 Exceptional Children's Week	11264
93-258 Groundwater Protection Month	11264
93-259 Law Day	11265
93-260 Mental Health Month	11266
93-261 Arts Week	11266
93-262 Better Hearing And Speech Month	11267
93-263 Garden Week	11267
93-264 High Blood Pressure Month	11268
93-265 Illinois Cancer Pain Awareness Day	11268
93-266 Keep America Beautiful Month	11269
93-267 Music Week	11269
93-268 Older Americans Month	11270
93-269 Staunton High School Buildings Day	11270
93-270 Student Council Week	11271
93-271 Lilac Time	11271
93-272 Clown Week	11272
93-273 Dr. James P. Paulissen Day	11272
93-274 Jesse White Day	11273
93-275 Father Raymond Baunhart Day	11274
93-276 WBEE, Charles Sherrell II, And Truitt T. Day	11274
93-277 Black Child Development Week	11275
93-278 Celebration of Reading Day	11275
93-279 Pediatric Brain Injury Awareness Month	11276
93-280 Pioneers Across America for Alzheimer's Research Month	11276
93-281 World champion Chicago Bulls Three-Peat Day	11277
93-282 Disaster Areas-Counties Along Upper Mississippi River Basin, Rock River and Chain-of-Lakes Area	11946
93-283 Disaster Areas-Counties Along Rock River and Lower Mississippi River Basin	11946
93-284 Christian Heritage Week	11947
93-285 Jaycee Haunted House Week	11947
93-286 Bell Ringing Day	11948
93-287 B'Nai B'Rith 150th Anniversary Day	11948
93-288 Chatham jaycees Sweet Corn Festival 20th Anniversary Day	11949

PROCLAMATIONS (CONT'D)

93-289 Clark County Citizens Expressed Gratitude
93-290 Coles County Citizens Expressed Gratitude
93-291 DeWitt County Citizens Expressed Gratitude
93-292 Edgar County Citizens Expressed Gratitude
93-293 Greathouse Family Reunion Day
93-294 Morgan County Citizens Expressed Gratitude
93-295 Shelby County Citizens Expressed Gratitude
93-296 Oak Park Sertoma Day
93-297 Professional Security Month
93-298 Vocational Education Week
93-299 Disaster Area - City of Chicago
93-300 Disaster Area - Greene County
93-301 Reverend W. N. Daniel Day
93-302 Day Of Prayer
93-303 Later Impression Days
93-304 Manufactured Housing Month
93-305 Tomorrow's Leaders Day
93-306 Park Livingston Day
93-307 Childhood Cancer Awareness Week
93-308 Therapeutic Recreation Week
93-309 Bud Billiken Day
93-310 Illinois Archery Week
93-311 Korean War Veterans Recognition Day
93-312 Korea Unification Day
93-313 Networking Together: Women Of Colors Leadership Days
93-314 Respect Lift Week
93-315 Stephen Darius & Stanley Girenas Day
93-316 Archaeology Awareness Week
93-317 Hosiery Week
93-318 Vocational Student Organization Week
93-319 Rick McGraw Day
93-320 Pat Cheffer Day
93-321 Disaster Area - Scott County
93-322 Disaster Areas - Brown, Cass, Knox, Morgan and Warren Counties
93-323 Disaster Areas - Fulton, Mason And Peoria Counties
93-324 Chamber Of Commerce Week
93-325 Converting Machinery And Materials Week
93-326 Cool And Casual Day For MDA
93-327 Hemochromatosis Screening Awareness Month
93-328 Italian-American Day
93-329 Michael Jordan Foundation Day
93-330 Gold Star Mother's Day
93-331 Housekeepers Week
93-332 Jewish Children's Bureau Of Chicago Congratulated
93-333 Laif Erickson Day
93-334 Municipal Clerks Week
93-335 Probation Officer Day

PROCLAMATIONS (CONT'D)

93-336 PTA Membership Month
93-337 Theatre Week In Illinois
93-338 World War I And Its Ladies Week
93-339 Customer Service Week
93-340 Reflex Sympathetic Dystrophy Syndrome Week
93-341 Teachers' Day
93-342 Dental Hygiene Month
93-343 Rehabilitation Professionals Week
93-344 School's Open Safety Week
93-345 Southern Gospel Music Month
93-346 Statewide Affordable Housing Week
93-347 Arts And Humanities Month
93-348 Gang Awareness Week
93-349 Bill Zahopoulos And Chris Tomaras Commended
93-350 Women's Business Development Day
93-351 National Basketball Players Association-Little City Foundation Day
93-352 Illinois River Basin/Conserve And Properly Utilize
93-353 India Independence Day
93-354 Pakistan Independence Day
93-355 Polish Soldier Day
93-356 Thai Heritage Day
93-357 United Charities Family And Mental Health Services/Southwest's Mental Health Program Honored
93-358 Disaster Area - Schuyler County
93-359 Homeless Animals' Day
93-360 Head Injury Awareness Month
93-361 Hispanic Professional Achievement Week
93-362 Lupus Awareness Month
93-363 Physical Therapy Month
93-364 Sleep Awareness Month
93-365 Spinal Health Care Month
93-366 Test And Check Your Smoke Detector Week
93-367 World Food Day
93-368 Charles N. Wheeler III Day
93-369 Ukrainian Independence Day
93-370 American Energy Awareness Month
93-371 SECA Kickoff Week
93-372 Try American Day
93-373 Special Session - Chicago Public Schools
93-374 Community Education Week
93-375 Richard H. Moy Day
93-376 Dr. Edwin Archibald Lee Sr. Day
93-377 Firefighters Appreciation Month
93-378 Uruguay Day
93-379 Dr. Duane Elbert Commended
93-380 5 A Day Week

PROCLAMATIONS (CONT'D)

93-381	Parliament Of World Religions Day	14715
93-382	Week Of Unity	14716
93-383	Child And Youth Care Worker Week	15204
93-384	Day Of The Working Parent	15204
93-385	Hispanic Heritage Month	15205
93-386	Hunter Education Week	15205
93-387	Hunting And Fishing Days	15206
93-388	Metric Week	15206
93-389	Vocational Education Week	15207
93-390	Bicentennial Of Orthodox Christianity In North America	15207
93-391	Continuity Of Care Week	15208
93-392	Easter Seal Homebound Week	15208
93-393	Illinois Judicial Council Day	15209
93-394	Iron Overload Diseases Awareness Week	15210
93-395	POW/MIA Recognition Day	15210
93-396	Chicago Latino Film Festival Days	15211
93-397	Constitution Week	15211
93-398	Decade Of Peace	15212
93-399	Chicago Teen Challenge Day	15212
93-400	Joyce E. Christensen Day	15212
93-401	Minority Enterprise Development Week	15213
93-402	Naval Order Of The United States Days	15213
93-403	Single Parents Day	15214
93-404	Women In Construction Week	15214
93-405	Women's Board Of Michael Reese Hospital Day	15215
93-406	Certified Professional Secretaries Month	15739
93-407	Crime Prevention Month	15739
93-408	German-American Day	15740
93-409	Lions Candy Day	15741
93-410	Osteopathic Medicine Week	15741
93-411	Amigos De Ser Day	15741
93-412	Mexican Independence Day	15742
93-413	D.A.R.E. Day	15742
93-414	Deaf Awareness Week	15743
93-415	Employment Equity Week	15744
93-416	Help Retarded Citizens Days	15744
93-417	Italian Heritage Month	15745
93-418	Travelers With Disabilities Awareness Week	15745

The Sections Affected Index lists, by Title, each Section of a part on which rulemaking activity has occurred in this volume (calendar year) of the Register. The columns indicate the type of rulemaking activity and the action taken along with the page number on which the first page of the notice of rulemaking activity appeared. If a Section on which action is being taken in the current volume of the Register was proposed in a previous volume, the last two digits of the previous volume's year appear immediately after the page number separated by a slash (e.g. 11 Ill. Adm. Code 436.05 was proposed last year and adopted this year. The action entry reads: (P-15655/91; A-4520). The codes are listed below.

TYPE OF RULEMAKING

ACTION CODES

am =	amendment to existing Section	A =	Adopted rule	PF =	Prohibited filing
cc =	codification changes	C =	Correction	S =	Suspension
n =	new Section	P =	Proposed Rule	O =	ICAR Objection
r =	repeal of existing Section	E =	Emergency rule	R =	Refusal to Modify
re =	recodified	PP =	Peremptory rule	F =	Failure to Remedy
# =	renumbered	M =	Modification		Objections Objection
		W =	Withdrawal	RC =	Recommendation
		RQ =	Request for Correction	EC =	Expedited Correction
				CC =	Codification Changes

TITLE 1 (CONT'D)		TITLE 4 (CONT'D)	
260.1300 am	(P-13233)	125.60 n	(P-2283/92; A-1811)
260.Ex.A	(CC-5960)	125.70 n	(P-2283/92; A-1811)
260.Ex.B	(CC-5960)	125.80 n	(P-2283/92; A-1811)
260.Ex.C	(P-13233)	125.Ap.A	(P-1263)
260.Ex.D	(P-13233)	150.10 n	(P-1263)
300.100 am	(P-11391/92; A-1511)	150.20 n	(P-1263)
300.200 am	(P-11391/92; A-1511)	150.30 n	(P-1263)
300.300 r	(P-11391/92; A-1511)	150.40 n	(P-1263)
300.400 am	(P-11391/92; A-1511)	150.50 n	(P-1263)
300.Ap.A	(P-11391/92; A-1511)	150.60 n	(P-1263)
TITLE 2		200.1 n	(P-1954/92; A-2200)
550.210 am	(A-9986)	200.2 n	(P-1954/92; A-2200)
550.Tb.A	(A-9986)	200.20 n	(P-1954/92; A-2200)
825.110	(CC-8092)	200.30 n	(P-1954/92; A-2200)
951.	(CC-13227)	200.50 n	(P-1954/92; A-2200)
1200.100 n	(A-7054)	200.60 n	(P-1954/92; A-2200)
1270.110 n	(A-14659)	200.70 n	(P-1954/92; A-2200)
1270.120 n	(A-14659)	225.10 n	(P-7749/92; A-2945)
1270.210 n	(A-14659)	225.20 n	(P-7749/92; A-2945)
1270.220 n	(A-14659)	225.30 n	(P-7749/92; A-2945)
1270.310 n	(A-14659)	225.40 n	(P-7749/92; A-2945)
1270.320 n	(A-14659)	225.50 n	(P-7749/92; A-2945)
1270.410 n	(A-14659)	225.60 n	(P-7749/92; A-2945)
1270.420 n	(A-14659)	225.70 n	(P-7749/92; A-2945)
1270.510 n	(A-14659)	275	(A-15102/92; CC-1673)
1270.520 n	(A-14659)	300	(A-8565/92; CC-1673)
1270.530 n	(A-14659)	325	(P-5582; A-9994)
1600.100	(CC-8094)	350.110 n	(P-5582; A-9994)
1601.10	(CC-8093)	350.120 n	(P-5582; A-9994)
1976.10	(CC-13226)	350.130 n	(P-5582; A-9994)
2075.100	(CC-8096)	350.140 n	(P-5582; A-9994)
2150.	(CC-8097)	350.150 n	(P-5582; A-9994)
5001.600 n	(A-14913)	350.160 n	(P-5582; A-9994)
5175.	(CC-6904)	350.170 n	(P-5582; A-9994)
5176.	(CC-6903)	350.180 n	(P-5582; A-9994)
TITLE 3		375	(A-15976/92; CC-1673)
800.20 n	(P-15828/92; A-6513)	400	(A-12439/92; CC-1673)
850.10 n	(P-15832/92; A-6517)	475	(A-10423/92; CC-1673)
TITLE 4		500	(A-11426/92; CC-1673)
125.10 n	(P-2283/92; A-1811)	550	(A-11744/92; CC-1673)
125.20 n	(P-2283/92; A-1811)	575	(A-14621/92; CC-1673)
125.30 n	(P-2283/92; A-1811)	700.101 n	(P-15684/92; A-6507)
125.40 n	(P-2283/92; A-1811)	700.102 n	(P-15684/92; A-6507)
125.50 n	(P-2283/92; A-1811)	700.103 n	(P-15684/92; A-6507)
		700.201 n	(P-15684/92; A-6507)
		700.202 n	(P-15684/92; A-6507)
		700.203 n	(P-15684/92; A-6507)
		700.204 n	(P-15684/92; A-6507)

TITLE 1 (CONT'D)		TITLE 4 (CONT'D)	
260.1300 am	(P-13233)	125.60 n	(P-2283/92; A-1811)
260.Ex.A	(CC-5960)	125.70 n	(P-2283/92; A-1811)
260.Ex.B	(CC-5960)	125.80 n	(P-2283/92; A-1811)
260.Ex.C	(P-13233)	125.Ap.A	(P-1263)
260.Ex.D	(P-13233)	150.10 n	(P-1263)
300.100 am	(P-11391/92; A-1511)	150.20 n	(P-1263)
300.200 am	(P-11391/92; A-1511)	150.30 n	(P-1263)
300.300 r	(P-11391/92; A-1511)	150.40 n	(P-1263)
300.400 am	(P-11391/92; A-1511)	150.50 n	(P-1263)
300.Ap.A	(P-11391/92; A-1511)	150.60 n	(P-1263)
TITLE 2		200.1 n	(P-1954/92; A-2200)
550.210 am	(A-9986)	200.2 n	(P-1954/92; A-2200)
550.Tb.A	(A-9986)	200.20 n	(P-1954/92; A-2200)
825.110	(CC-8092)	200.30 n	(P-1954/92; A-2200)
951.	(CC-13227)	200.50 n	(P-1954/92; A-2200)
1200.100 n	(A-7054)	200.60 n	(P-1954/92; A-2200)
1270.110 n	(A-14659)	200.70 n	(P-1954/92; A-2200)
1270.120 n	(A-14659)	225.10 n	(P-7749/92; A-2945)
1270.210 n	(A-14659)	225.20 n	(P-7749/92; A-2945)
1270.220 n	(A-14659)	225.30 n	(P-7749/92; A-2945)
1270.310 n	(A-14659)	225.40 n	(P-7749/92; A-2945)
1270.320 n	(A-14659)	225.50 n	(P-7749/92; A-2945)
1270.410 n	(A-14659)	225.60 n	(P-7749/92; A-2945)
1270.420 n	(A-14659)	225.70 n	(P-7749/92; A-2945)
1270.510 n	(A-14659)	275	(A-15102/92; CC-1673)
1270.520 n	(A-14659)	300	(A-8565/92; CC-1673)
1270.530 n	(A-14659)	325	(P-5582; A-9994)
1600.100	(CC-8094)	350.110 n	(P-5582; A-9994)
1601.10	(CC-8093)	350.120 n	(P-5582; A-9994)
1976.10	(CC-13226)	350.130 n	(P-5582; A-9994)
2075.100	(CC-8096)	350.140 n	(P-5582; A-9994)
2150.	(CC-8097)	350.150 n	(P-5582; A-9994)
5001.600 n	(A-14913)	350.160 n	(P-5582; A-9994)
5175.	(CC-6904)	350.170 n	(P-5582; A-9994)
5176.	(CC-6903)	350.180 n	(P-5582; A-9994)
TITLE 3		375	(A-15976/92; CC-1673)
800.20 n	(P-15828/92; A-6513)	400	(A-12439/92; CC-1673)
850.10 n	(P-15832/92; A-6517)	475	(A-10423/92; CC-1673)
TITLE 4		500	(A-11426/92; CC-1673)
125.10 n	(P-2283/92; A-1811)	550	(A-11744/92; CC-1673)
125.20 n	(P-2283/92; A-1811)	575	(A-14621/92; CC-1673)
125.30 n	(P-2283/92; A-1811)	700.101 n	(P-15684/92; A-6507)
125.40 n	(P-2283/92; A-1811)	700.102 n	(P-15684/92; A-6507)
125.50 n	(P-2283/92; A-1811)	700.103 n	(P-15684/92; A-6507)
		700.201 n	(P-15684/92; A-6507)
		700.202 n	(P-15684/92; A-6507)
		700.203 n	(P-15684/92; A-6507)
		700.204 n	(P-15684/92; A-6507)

ILLINOIS REGISTER

ILLINOIS REGISTER
Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

[illegible]

SAI-7

ILLINOIS REGISTER

ILLINOIS REGISTER
 Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 11 (CONT'D)			150,510	am	(P-4167; A-11571)
1409.138	am	(P-4158; A-12429)	150,520	am	(P-4167; A-11571)
1409.140	am	(P-4158; A-12429)	150,620	am	(P-4167; A-11571)
1409.150	am	(P-4158; A-12429)	150,621	n	(P-4167; A-11571)
1409.160	am	(P-4158; A-12429)	150,700	n	(P-4167; A-11571)
1409.170	am	(P-4158; A-12429)	150,705	n	(P-4167; A-11571)
1409.180	am	(P-4158; A-12429)	150,710	n	(P-4167; A-11571)
1409.185	am	(P-4158; A-12429)	150,720	n	(P-4167; A-11571)
1411.120	am	(P-14094)	170.20	am	(P-13784/92; A-427)
1411.150	am	(P-14094)	178.10	n	(P-13672)
1411.250	n	(P-1372; A-12426)	178.15	n	(P-13672)
1413.44	am	(P-14090)	178.20	n	(P-13672)
1413.46	am	(P-14090)	178.25	n	(P-13672)
1413.100	am	(P-14090)	178.30	n	(P-13672)
1413.150	am	(P-13218/92; A-1628)	178.35	n	(P-13672)
1416.5	am	(P-12274)	178.40	n	(P-13672)
1424.170	am	(P-12133/92; A-3038)	178.45	n	(P-13672)
1424.175	r	(P-12133/92; A-3038)	178.50	n	(P-13672)
1428.240	n	(P-3593; O-10011; RC-10012; M-12456; A-14049)	178.55	n	(P-13672)
		(E-3683; O-6550)	178.60	n	(P-13672)
1440.10	n	(E-14181)	178.100	n	(P-13672)
1440.20	n	(E-14181)	178.105	n	(P-13672)
1440.30	n	(E-14181)	178.115	n	(P-13672)
1440.40	n	(E-14181)	178.120	n	(P-13672)
1440.50	n	(E-14181)	178.125	n	(P-13672)
1440.60	n	(E-14181)	178.130	n	(P-13672)
1440.70	n	(E-14181)	178.135	n	(P-13672)
1440.80	n	(E-14181)	178.140	n	(P-13672)
1770.20	am	(P-16738/92; C-8074)	178.145	n	(P-13672)
1770.110	am	(P-16738/92; C-8074)	178.150	n	(P-13672)
1770.170	am	(P-16738/92; C-8074)	178.155	n	(P-13672)
1770.190	am	(P-16738/92; C-8074)	178.160	n	(P-13672)
			178.165	n	(P-13672)
			178.170	n	(P-13672)
			178.175	n	(P-13672)
			178.180	n	(P-13672)
			178.185	n	(P-13672)
			510.20	am	(P-14318)
			510.50	am	(P-14318)
			510.60	am	(P-14318)
			510.70	am	(P-14318)
			510.80	am	(P-14318)
			510.85	am	(P-14318)
			520.520	n	(P-9791)
			520.920	am	(P-13691/92; A-1837)
			520.930	am	(P-13691/92; A-1837)
			520.1020	am	(P-13691/92; A-1837)
TITLE 14					
150.20	am	(P-4167; A-11571)	178.175	n	(P-13672)
150.200	am	(P-4167; A-11571)	178.180	n	(P-13672)
150.210	am	(P-4167; A-11571)	178.185	n	(P-13672)
150.220	am	(P-4167; A-11571)	510.20	am	(P-14318)
150.240	am	(P-4167; A-11571)	510.50	am	(P-14318)
150.305	r	(P-4167; A-11571)	510.60	am	(P-14318)
	n	(A-11571)	510.70	am	(P-14318)
150.400	am	(P-4167; A-11571)	510.80	am	(P-14318)
150.405	am	(P-4167; A-11571)	510.85	am	(P-14318)
150.420	am	(P-4167; A-11571)	520.520	n	(P-9791)
150.435	am	(P-4167; A-11571)	520.920	am	(P-13691/92; A-1837)
150.470	am	(P-4167; A-11571)	520.930	am	(P-13691/92; A-1837)
	am	(P-4167; A-11571)	520.1020	am	(P-13691/92; A-1837)

SAI-8

Volume 17, Issue #39			SECTIONS AFFECTED INDEX		September 24, 1999	
TITLE 14 (CONT'D)						
520.1030	am	(P-13691/92; A-1837)	650.21	am	(P-4718; A-13468)	
1230.100	n	(P-9222/92; A-1859)	650.22	am	(P-4718; A-13468)	
1230.110	n	(P-9222/92; A-1859)	650.40	am	(P-4718; A-13468)	
1230.200	n	(P-9222/92; A-1859)	650.50	am	(P-4718; A-13468)	
1230.210	n	(P-9222/92; A-1859)	650.60	am	(P-4718; A-13468)	
1230.300	n	(P-9222/92; A-1859)	650.65	n	(P-4718; A-13468)	
1230.310	n	(P-9222/92; A-1859)	660.20	am	(P-4742; A-10865)	
1230.400	n	(P-9222/92; A-1859)	660.22	n	(P-4742; A-10865)	
1230.500	n	(P-9222/92; A-1859)	660.30	am	(P-4742; A-10865)	
1230.510	n	(P-9222/92; A-1859)	660.40	am	(P-4742; A-10865)	
1230.520	n	(P-9222/92; A-1859)	660.45	am	(P-4742; A-10865)	
1230.530	n	(P-9222/92; A-1859)	660.50	am	(P-4742; A-10865)	
1230.540	n	(P-9222/92; A-1859)	660.60	am	(P-4742; A-10865)	
			670.10	am	(P-15265/92; A-286)	
TITLE 17						
220.30	am	(P-19993/92; A-6760)	670.20	am	(P-4698; A-13452)	
220.60	am	(P-19993/92; A-6760)	670.30	am	(P-4698; A-13452)	
370.		(CC-8091)	670.40	am	(P-4698; A-13452)	
390.		(CC-8090)	670.50	am	(P-4698; A-13452)	
510.10	am	(P-4601; A-10775)	670.60	am	(P-15265/92; A-286)	
530.10	am	(P-7138; A-15534)			(P-4698; A-13452)	
530.20	am	(P-7138; A-15534)	680.10	am	(P-12055)	
530.70	am	(P-7138; A-15534)	680.20	am	(P-12055)	
530.80	am	(P-7138; A-15534)	680.40	am	(P-12055)	
530.90	am	(P-7138; A-15534)	680.50	am	(P-12055)	
530.100	am	(P-7138; A-15534)	680.80	am	(P-12055)	
530.105	am	(P-7138; A-15534)	690.30	am	(P-4672; A-10842)	
530.110	am	(P-7138; A-15534)	710.10	am	(P-18181/92; A-3184)	
530.115	am	(P-7138; A-15534)	710.20	am	(P-18181/92; A-3184)	
530.120	am	(P-7138; A-15534)	710.30	am	(P-18181/92; A-3184)	
550.10	am	(P-4622; A-10795)	710.50	am	(P-18181/92; A-3184)	
550.20	am	(P-4622; A-10795)	715.10	am	(P-4689; A-10858)	
550.30	am	(P-4622; A-10795)	715.20	am	(P-4689; A-10858)	
570.20	am	(P-4611; A-10785)	715.21	n	(P-4689; A-10858)	
570.30	am	(P-4611; A-10785)	715.40	am	(P-4689; A-10858)	
		(P-17038)	720.10	am	(P-15260/92; A-281)	
570.40	am	(P-4611; A-10785)			(P-4680; A-10850)	
590.10	am	(E-1658) (P-4554)	720.20	am	(P-4680; A-10850)	
590.20	am	(P-4554)	720.40	am	(P-15260/92; A-281)	
590.25	am	(P-4554)			(P-4680; A-10850)	
590.26	am	(P-4554)	730.10	am	(P-4539; A-10761)	
590.30	am	(P-4554)	730.20	am	(P-4539; A-10761)	
590.40	am	(P-4554)	730.30	am	(P-4539; A-10761)	
590.50	am	(P-4554)	740.10	am	(P-4757; A-10877)	
590.60	am	(P-4554)	740.20	am	(P-4757; A-10877)	
590.70	am	(P-4718; A-13468)	810.20	am	(P-17414/92; A-3853)	
650.20	am		810.35	am	(P-17414/92; A-3853)	

[illegible]

TITLE 23			TITLE 23 (CONT'D)			TITLE 26			TITLE 29			TITLE 32		
1.10	am	(P-10079)	1501.301	am	(P-6686)	2731.20	am	(P-1381; A-10559)	3040.200	am	(P-958; A-7234)			
1.20	am	(P-10079)	1501.302	am	(P-6686)	2732.10	am	(P-1493; A-10620)	3040.210	am	(P-958; A-7234)			
1.30	am	(P-10079)	1501.303	am	(P-11993)	2732.20	am	(P-1493; A-10620)	3040.220	am	(P-958; A-7234)			
1.40	am	(P-10079)	1501.309	am	(P-6686)	2733.10	am	(P-1444; A-10570)	3040.230	am	(P-958; A-7234)			
1.50	am	(P-10079)	1501.406	am	(P-6686)	2733.20	am	(P-1444; A-10570)	3040.240	am	(P-958; A-7234)			
1.60	am	(P-10079)	1501.501	am	(P-6686)	2733.30	am	(P-1444; A-10570)	3040.250	am	(P-958; A-7234)			
1.70	am	(P-10079)	1501.503	am	(P-6686)	2735.10	am	(P-1470; A-10596)	3040.260	am	(P-958; A-7234)			
1.80	am	(P-10079)	1501.505	am	(P-6686)	2735.20	am	(P-1470; A-10596)						
1.90	n	(P-10079)	1501.507	am	(P-6686)	2735.30	am	(E-6672)						
1.100	n	(P-10079)	1501.508	am	(P-11993)	2735.40	am	(P-1470; A-10596)	100.10	am	(P-14333)			
.Ap.D	n	(P-10079)	1501.516	am	(P-6686)	2735.50	am	(P-1470; A-10596)	100.70	am	(P-14333)			
.Ap.E	n	(P-10079)	1501.607	am	(P-6686)	2735.60	am	(P-1470; A-10596)	207.120	n	(P-14342)			
.Ap.F	n	(P-10079)	1501.703	am	(P-6686)	2735.70	am	(P-1470; A-10596)	207.130	n	(P-14342)			
.Ap.G	n	(P-10079)	2310.80	am	(P-1691; A-9680)	2735.80	am	(P-1470; A-10596)	207.Ap.A	am	(P-14342)			
1.736	n	(P-8684;92; A-18010/92; EC-3553)	2700.20	am	(P-1385; A-10541)	2735.100	am	(P-1470; A-10596)						
210.10	r	(P-10061)	2700.40	am	(P-1385; A-10541)	2760.5	am	(P-1497; A-10624)	300.10	r	(P-13865)			
210.100	r	(P-10061)	2700.50	am	(P-1385; A-10541)	2760.10	am	(P-1497; A-10624)	300.20	r	(P-13865)			
210.110	r	(P-10061)	2700.55	am	(P-1385; A-10541)	2760.30	am	(P-1497; A-10624)	300.30	r	(P-13865)			
210.120	r	(P-10061)	2700.60	am	(P-1385; A-10541)	2760.40	am	(P-1497; A-10624)	300.40	r	(P-13865)			
210.130	r	(P-10061)	2700.70	am	(P-1385; A-10541)	2761.10	am	(P-1453; A-10579)	300.50	r	(P-13865)			
210.140	r	(P-10061)	2720.5	am	(P-1403; A-10506)	2761.20	am	(P-1453; A-10579)	300.60	r	(P-13865)			
210.150	r	(P-10061)	2720.6	am	(P-1403; A-10506)	2761.30	am	(P-1453; A-10579)	300.70	r	(P-13865)			
210.200	r	(P-10061)	2720.10	am	(P-1403; A-10506)	2762.10	am	(P-1484; A-10611)	300.80	r	(P-13865)			
210.210	r	(P-10061)	2720.20	am	(P-1403; A-10506)	2762.20	am	(P-1484; A-10611)	510.10	r	(P-13875)			
210.220	r	(P-10061)	2720.25	am	(P-1403; A-10506)	2762.30	am	(P-1484; A-10611)	510.20	r	(P-13875)			
226.525	am	(P-13231) (E-13622)	2720.30	am	(P-1403; A-10506)	2762.40	am	(P-1484; A-10611)	510.30	r	(P-13875)			
228.15	n	(P-9253;92; A-104)	2720.40	am	(P-1403; A-10506)	2763.10	am	(P-1459; A-10585)	510.40	r	(P-13875)			
228.20	am	(P-9253;92; A-104)			(E-2055)	2763.20	am	(E-175)	510.50	r	(P-13875)			
228.25	n	(P-9253;92; A-104)	2720.41	am	(P-1403; A-10506)			(P-1459; A-10585)	1300.10	n	(P-13856)			
228.30	am	(P-9253;92; A-104)	2720.42	am	(P-1403; A-10506)	2763.30	am	(P-1459; A-10585)	1300.20	n	(P-13856)			
228.50	am	(P-9253;92; A-104)	2720.50	am	(P-1403; A-10506)	2763.40	am	(P-1459; A-10585)	1300.30	n	(P-13856)			
245.10	n	(P-10131)	2720.55	am	(P-1403; A-10506)	2773.50	am	(P-1459; A-10585)	1300.40	n	(P-13856)			
245.20	n	(P-10131)	2720.60	am	(P-1403; A-10506)	2770.10	am	(P-1505; A-10632)	1300.50	n	(P-13856)			
245.30	n	(P-10131)	2720.70	am	(P-1403; A-10506)	2770.20	am	(P-1505; A-10632)	1300.60	n	(P-13856)			
245.40	n	(P-10131)	2720.80	am	(P-1403; A-10506)	2770.30	am	(P-1505; A-10632)	1310.10	n	(P-13843)			
245.50	n	(P-10131)	2720.90	am	(P-1403; A-10506)	3030.10	am	(P-9678) (E-9725)	1310.20	n	(P-13843)			
245.60	n	(P-10131)	2720.105	am	(P-1403; A-10506)	3030.105	am	(P-9678) (E-9725)	1310.30	n	(P-13843)			
245.70	n	(P-10131)	2720.120	am	(P-1403; A-10506)			(P-12277) (E-12449)	1310.40	n	(P-13843)			
451.220	am	(P-12062)	2720.130	am	(P-1403; A-10506)	3040.100	am	(P-958; A-7234)	1310.50	n	(P-13843)			
1501.518	n	(P-12274;92; A-1853)	2720.200	am	(P-1403; A-10506)	3040.110	am	(P-958; A-7234)						
1501.102	am	(P-6686)	2720.210	am	(P-1403; A-10506)	3040.120	am	(P-958; A-7234)						
1501.105	am	(P-6686)	2720.Ap.A	am	(P-1403; A-10506)	3040.130	am	(P-958; A-7234)	310.10	am	(P-3787)			
1501.109	am	(P-6686)	2730.5	am	(P-1437; A-10563)	3040.140	am	(P-958; A-7234)	310.20	am	(P-3787)			
1501.110	am	(P-6686)	2730.10	am	(P-1437; A-10563)	3040.150	am	(P-958; A-7234)	310.80	am	(P-3787)			
1501.201	am	(P-6686)	2730.20	am	(P-1437; A-10563)	3040.160	am	(P-958; A-7234)	310.81	am	(P-3787)			
1501.202	am	(P-6686)	2731.10	am	(P-1381; A-10559)	3040.170	am	(P-958; A-7234)	310.82	am	(P-3787)			

TITLE 32 (CONT'D)			505.40	n	(P-15220) (E-15667)
350.3060	r	(P-13882)	505.50	n	(P-15220) (E-15667)
350.3070	r	(P-13882)	505.60	n	(P-15220) (E-15667)
350.3080	r	(P-13882)	505.70	n	(P-15220) (E-15667)
350.3090	n	(P-13882)	505.80	n	(P-15220) (E-15667)
350.4000	n	(P-13882)	505.82	n	(P-15220) (E-15667)
350.4010	n	(P-13882)	505.84	n	(P-15220) (E-15667)
350.4020	n	(P-13882)	505.86	n	(P-15220) (E-15667)
350.4030	n	(P-13882)	505.90	n	(P-15220) (E-15667)
350.Ap.A	am	(P-13882)	505.100	n	(P-15220) (E-15667)
350.Ap.B	am	(P-13882)	505.110	n	(P-15220) (E-15667)
350.Ap.C	n	(P-13882)	505.120	n	(P-15220) (E-15667)
351.10	am	(P-8674)	505.130	n	(P-15220) (E-15667)
351.40	am	(P-8674)	505.140	n	(P-15220) (E-15667)
351.1010	am	(P-8674)	505.150	n	(P-15220) (E-15667)
351.1040	am	(P-8674)	505.160	n	(P-15220) (E-15667)
351.1050	am	(P-8674)	505.170	n	(P-15220) (E-15667)
351.1060	am	(P-8674)	505.180	n	(P-15220) (E-15667)
351.1070	am	(P-8674)	505.190	n	(P-15220) (E-15667)
351.1080	am	(P-8674)	505.1000	n	(P-15220) (E-15667)
351.1090	am	(P-8674)	505.1100	n	(P-15220) (E-15667)
351.1100	am	(P-8674)	505.1200	n	(P-15220) (E-15667)
351.2010	am	(P-8674)	505.1300	n	(P-15220) (E-15667)
351.2020	am	(P-8674)	505.1400	n	(P-15220) (E-15667)
351.2030	am	(P-8674)	505.1500	n	(P-15220) (E-15667)
351.3030	am	(P-8674)	505.1600	n	(P-15220) (E-15667)
351.3040	am	(P-8674)	505.1700	n	(P-15220) (E-15667)
351.4010	am	(P-8674)	505.1800	n	(P-15220) (E-15667)
351.4020	am	(P-8674)	505.1900	n	(P-15220) (E-15667)
351.4030	am	(P-8674)	505.2000	n	(P-15220) (E-15667)
351.5010	am	(P-8674)	505.2100	n	(P-15220) (E-15667)
351.Ap.B	am	(P-8674)	505.2200	n	(P-15220) (E-15667)
390.20	am	(P-8666)	505.2300	n	(P-15220) (E-15667)
390.30	am	(P-8666)	505.2400	n	(P-15220) (E-15667)
390.40	am	(P-8666)	505.2500	n	(P-15220) (E-15667)
390.50	am	(P-8666)	505.2600	n	(P-15220) (E-15667)
390.60	am	(P-8666)	505.2700	n	(P-15220) (E-15667)
390.70	am	(P-8666)	505.2800	n	(P-15220) (E-15667)
400.10	am	(P-8655)	505.2900	n	(P-15220) (E-15667)
400.110	am	(P-8655)	TITLE 35		
400.120	am	(P-8655)	183.105	am	(P-12659/92; A-12319)
400.130	am	(P-8655)	183.110	am	(P-12659/92; A-12319)
400.140	am	(P-8655)	183.115	am	(P-12659/92; A-12319)
400.150	am	(P-8655)	183.120	am	(P-12659/92; A-12319)
400.160	am	(P-8655)	183.125	am	(P-12659/92; A-12319)
505.10	n	(P-15220) (E-15667)	183.130	am	(P-12659/92; A-12319)
505.20	n	(P-15220) (E-15667)	183.131	n	(P-12659/92; A-12319)

TITLE 35 (CONT'D)			
183.132	n	(P-12659/92; A-12319)	201.162 am (P-13371)
183.133	n	(P-12659/92; A-12319)	201.163 am (P-13371)
183.134	n	(P-12659/92; A-12319)	201.180 am (P-13371)
183.135	am	(P-12659/92; A-12319)	201.181 am (P-13371)
183.140	am	(P-12659/92; A-12319)	201.187 am (P-13371)
183.145	am	(P-12659/92; A-12319)	203.101 am (P-18919/92; A-6973)
183.150	am	(P-12659/92; A-12319)	203.107 am (P-18919/92; A-6973)
183.160	am	(P-12659/92; A-12319)	203.110 am (P-18919/92; A-6973)
183.170	r	(P-12659/92; A-12319)	203.112 am (P-18919/92; A-6973)
183.210	am	(P-12659/92; A-12319)	203.123 # (P-18919/92; A-6973)
183.215	am	(P-12659/92; A-12319)	203.123 n (P-18919/92; A-6973)
183.220	am	(P-12659/92; A-12319)	203.126 am (P-18919/92; A-6973)
183.225	am	(P-12659/92; A-12319)	203.128 am (P-18919/92; A-6973)
183.230	am	(P-12659/92; A-12319)	203.145 r (P-4898)
183.231	n	(P-12659/92; A-12319)	203.150 am (P-18919/92; A-6973)
183.235	am	(P-12659/92; A-12319)	203.201 am (P-18919/92; A-6973)
183.240	am	(P-12659/92; A-12319)	203.203 am (P-18919/92; A-6973)
183.245	am	(P-12659/92; A-12319)	203.206 am (P-18919/92; A-6973)
183.250	am	(P-12659/92; A-12319)	203.207 am (P-18919/92; A-6973)
183.255	am	(P-12659/92; A-12319)	203.208 am (P-18919/92; A-6973)
183.310	am	(P-12659/92; A-12319)	203.209 am (P-18919/92; A-6973)
183.315	am	(P-12659/92; A-12319)	203.301 am (P-18919/92; A-6973)
183.320	am	(P-12659/92; A-12319)	203.302 am (P-18919/92; A-6973)
183.325	am	(P-12659/92; A-12319)	203.303 am (P-18919/92; A-6973)
183.330	am	(P-12659/92; A-12319)	203.306 am (P-18919/92; A-6973)
183.335	am	(P-12659/92; A-12319)	203.801 n (P-18919/92; A-6973)
183.340	am	(P-12659/92; A-12319)	211.102 am (P-4782)
183.345	am	(P-12659/92; A-12319)	211.121 am (P-4782)
183.350	am	(P-12659/92; A-12319)	211.122 r (P-4782)
183.355	am	(P-12659/92; A-12319)	211.130 n (P-4782)
183.360	am	(P-12659/92; A-12319)	211.150 n (P-4782)
183.365	am	(P-12659/92; A-12319)	211.170 n (P-4782)
183.370	am	(P-12659/92; A-12319)	211.210 n (P-4782)
183.406	n	(P-12659/92; A-12319)	211.230 n (P-4782)
183.410	am	(P-12659/92; A-12319)	211.250 n (P-4782)
183.415	am	(P-12659/92; A-12319)	211.270 n (P-12491)
183.420	am	(P-12659/92; A-12319)	211.290 n (P-4782)
183.425	am	(P-12659/92; A-12319)	211.310 n (P-4782)
183.430	am	(P-12659/92; A-12319)	211.330 n (P-4782)
183.435	am	(P-12659/92; A-12319)	211.350 n (P-4782)
183.440	am	(P-12659/92; A-12319)	211.370 n (P-4782)
183.445	am	(P-12659/92; A-12319)	211.390 n (P-4782)
183.450	am	(P-12659/92; A-12319)	211.410 n (P-4782)
183. Ap. A	am	(P-12659/92; A-12319)	211.430 n (P-4782)
183. Ap. B	n	(P-12659/92; A-12319)	211.450 n (P-4782)
190.	Joint	See 35-183	211.470 n (P-4782)
195.	Joint	See 35-183	211.490 n (P-4782)

ILLINOIS REGISTER

Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 35 (CONT'D)

211.510 n	(P-4782)	211.1490 n	(P-4782)
211.530 n	(P-4782)	211.1510 n	(P-4782)
211.550 n	(P-4782)	211.1530 n	(P-4782)
211.570 n	(P-4782)	211.1550 n	(P-4782)
211.590 n	(P-4782)	211.1570 n	(P-4782)
211.610 n	(P-4782)	211.1590 n	(P-4782)
211.630 n	(P-4782)	211.1610 n	(P-4782)
211.650 n	(P-4782)	211.1630 n	(P-4782)
211.670 n	(P-4782)	211.1650 n	(P-4782)
211.690 n	(P-4782)	211.1670 n	(P-4782)
211.710 n	(P-4782)	211.1690 n	(P-4782)
211.730 n	(P-4782)	211.1710 n	(P-4782)
211.750 n	(P-4782)	211.1730 n	(P-4782)
211.770 n	(P-4782)	211.1750 n	(P-4782)
211.790 n	(P-4782)	211.1770 n	(P-4782)
211.810 n	(P-4782)	211.1790 n	(P-4782)
211.830 n	(P-4782)	211.1810 n	(P-4782)
211.850 n	(P-4782)	211.1830 n	(P-4782)
211.870 n	(P-4782)	211.1850 n	(P-4782)
211.890 n	(P-4782)	211.1870 n	(P-4782)
211.910 n	(P-4782)	211.1890 n	(P-4782)
211.930 n	(P-4782)	211.1910 n	(P-4782)
211.950 n	(P-4782)	211.1930 n	(P-4782)
211.970 n	(P-4782)	211.1950 n	(P-4782)
211.990 n	(P-4782)	211.1970 n	(P-4782)
211.1010 n	(P-4782)	211.1990 n	(P-4782)
211.1050 n	(P-4782)	211.2010 n	(P-4782)
211.1070 n	(P-12491)	211.2030 n	(P-12491)
211.1090 n	(P-4782)	211.2050 n	(P-4782)
211.1110 n	(P-4782)	211.2070 n	(P-4782)
211.1130 n	(P-4782)	211.2090 n	(P-4782)
211.1150 n	(P-4782)	211.2110 n	(P-4782)
211.1170 n	(P-4782)	211.2130 n	(P-4782)
211.1190 n	(P-4782)	211.2150 n	(P-4782)
211.1210 n	(P-4782)	211.2170 n	(P-4782)
211.1230 n	(P-4782)	211.2190 n	(P-4782)
211.1250 n	(P-4782)	211.2210 n	(P-4782)
211.1270 n	(P-4782)	211.2230 n	(P-4782)
211.1290 n	(P-4782)	211.2250 n	(P-4782)
211.1310 n	(P-4782)	211.2270 n	(P-4782)
211.1330 n	(P-4782)	211.2310 n	(P-4782)
211.1350 n	(P-4782)	211.2330 n	(P-4782)
211.1370 n	(P-4782)	211.2350 n	(P-4782)
211.1390 n	(P-4782)	211.2370 n	(P-4782)
211.1410 n	(P-4782)	211.2390 n	(P-4782)
211.1430 n	(P-4782)	211.2410 n	(P-4782)
211.1470 n	(P-4782)	211.2430 n	(P-4782)
		211.2450 n	(P-4782)

SAI-17

ILLINOIS REGISTER

Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 35 (CONT'D)

211.2470 n	(P-4782)	211.3430 n	(P-4782)
211.2490 n	(P-4782)	211.3450 n	(P-4782)
211.2510 n	(P-4782)	211.3470 n	(P-4782)
211.2530 n	(P-4782)	211.3490 n	(P-4782)
211.2550 n	(P-4782)	211.3510 n	(P-4782)
211.2570 n	(P-4782)	211.3530 n	(P-4782)
211.2590 n	(P-4782)	211.3550 n	(P-4782)
211.2610 n	(P-12491)	211.3570 n	(P-4782)
211.2650 n	(P-4782)	211.3590 n	(P-4782)
211.2670 n	(P-4782)	211.3610 n	(P-4782)
211.2690 n	(P-4782)	211.3630 n	(P-4782)
211.2710 n	(P-4782)	211.3650 n	(P-4782)
211.2730 n	(P-4782)	211.3670 n	(P-4782)
211.2750 n	(P-4782)	211.3690 n	(P-4782)
211.2770 n	(P-4782)	211.3710 n	(P-4782)
211.2790 n	(P-4782)	211.3730 n	(P-4782)
211.2810 n	(P-4782)	211.3750 n	(P-4782)
211.2830 n	(P-4782)	211.3770 n	(P-4782)
211.2850 n	(P-4782)	211.3790 n	(P-4782)
211.2870 n	(P-4782)	211.3810 n	(P-4782)
211.2890 n	(P-4782)	211.3830 n	(P-4782)
211.2910 n	(P-4782)	211.3850 n	(P-4782)
211.2930 n	(P-4782)	211.3870 n	(P-4782)
211.2950 n	(P-4782)	211.3890 n	(P-4782)
211.2970 n	(P-4782)	211.3910 n	(P-4782)
211.2990 n	(P-4782)	211.3930 n	(P-4782)
211.3010 n	(P-4782)	211.3950 n	(P-4782)
211.3030 n	(P-4782)	211.4010 n	(P-4782)
211.3050 n	(P-4782)	211.4030 n	(P-4782)
211.3070 n	(P-4782)	211.4050 n	(P-4782)
211.3090 n	(P-4782)	211.4070 n	(P-4782)
211.3110 n	(P-4782)	211.4090 n	(P-4782)
211.3130 n	(P-4782)	211.4110 n	(P-4782)
211.3150 n	(P-4782)	211.4130 n	(P-4782)
211.3170 n	(P-4782)	211.4150 n	(P-4782)
211.3190 n	(P-4782)	211.4170 n	(P-4782)
211.3210 n	(P-4782)	211.4190 n	(P-4782)
211.3230 n	(P-4782)	211.4210 n	(P-4782)
211.3250 n	(P-4782)	211.4230 n	(P-4782)
211.3270 n	(P-4782)	211.4250 n	(P-4782)
211.3290 n	(P-4782)	211.4270 n	(P-4782)
211.3310 n	(P-4782)	211.4290 n	(P-4782)
211.3330 n	(P-4782)	211.4310 n	(P-4782)
211.3350 n	(P-4782)	211.4330 n	(P-4782)
211.3370 n	(P-4782)	211.4350 n	(P-4782)
211.3390 n	(P-4782)	211.4370 n	(P-4782)
211.3410 n	(P-4782)	211.4390 n	(P-4782)

SAI-18

TITLE 35 (CONT'D)			
211.4410 n	(P-4782)	211.5390 n	(P-12491)
211.4430 n	(P-4782)	211.5410 n	(P-4782)
211.4450 n	(P-4782)	211.5430 n	(P-4782)
211.4470 n	(P-4782)	211.5450 n	(P-4782)
211.4490 n	(P-4782)	211.5470 n	(P-4782)
211.4510 n	(P-4782)	211.5490 n	(P-4782)
211.4530 n	(P-4782)	211.5500 n	(P-13358)
211.4550 n	(P-4782)	211.5510 n	(P-4782)
211.4590 n	(P-4782)	211.5530 n	(P-12491)
211.4610 n	(P-4782)	211.5550 n	(P-4782)
211.4630 n	(P-4782)	211.5570 n	(P-4782)
211.4650 n	(P-4782)	211.5590 n	(P-4782)
211.4670 n	(P-4782)	211.5610 n	(P-4782)
211.4690 n	(P-4782)	211.5630 n	(P-4782)
211.4710 n	(P-4782)	211.5650 n	(P-4782)
211.4730 n	(P-4782)	211.5670 n	(P-4782)
211.4750 n	(P-4782)	211.5690 n	(P-4782)
211.4770 n	(P-4782)	211.5710 n	(P-4782)
211.4790 n	(P-4782)	211.5730 n	(P-4782)
211.4810 n	(P-4782)	211.5750 n	(P-4782)
211.4830 n	(P-12491)	211.5770 n	(P-4782)
211.4850 n	(P-12491)	211.5790 n	(P-4782)
211.4870 n	(P-4782)	211.5810 n	(P-4782)
211.4890 n	(P-4782)	211.5830 n	(P-4782)
211.4910 n	(P-4782)	211.5850 n	(P-4782)
211.4930 n	(P-4782)	211.5870 n	(P-4782)
211.4950 n	(P-4782)	211.5890 n	(P-4782)
211.4970 n	(P-12491)	211.5910 n	(P-4782)
211.4990 n	(P-4782)	211.5930 n	(P-4782)
211.5030 n	(P-4782)	211.5950 n	(P-4782)
211.5050 n	(P-4782)	211.5970 n	(P-4782)
211.5070 n	(P-4782)	211.5990 n	(P-4782)
211.5090 n	(P-4782)	211.6010 n	(P-4782)
211.5110 n	(P-4782)	211.6030 n	(P-4782)
211.5130 n	(P-4782)	211.6050 n	(P-4782)
211.5150 n	(P-4782)	211.6070 n	(P-4782)
211.5170 n	(P-4782)	211.6090 n	(P-4782)
211.5190 n	(P-4782)	211.6110 n	(P-12491)
211.5210 n	(P-4782)	211.6130 n	(P-4782)
211.5230 n	(P-4782)	211.6150 n	(P-4782)
211.5250 n	(P-4782)	211.6170 n	(P-12491)
211.5270 n	(P-4782)	211.6190 n	(P-4782)
211.5290 n	(P-4782)	211.6210 n	(P-4782)
211.5310 n	(P-4782)	211.6230 n	(P-4782)
211.5330 n	(P-4782)	211.6250 n	(P-12491)
211.5350 n	(P-4782)	211.6270 n	(P-4782)
211.5370 n	(P-4782)	211.6290 n	(P-4782)
		211.6310 n	(P-4782)

TITLE 35 (CONT'D)			
211.6330 n	(P-4782)	211.7270 n	(P-4782)
211.6350 n	(P-4782)	211.7290 n	(P-4782)
211.6370 n	(P-4782)	211.7310 n	(P-4782)
211.6390 n	(P-4782)	211.7330 n	(P-4782)
211.6410 n	(P-4782)	211.7350 n	(P-4782)
211.6430 n	(P-4782)	218.100 am	(P-4905)
211.6450 n	(P-4782)	218.101 r	(P-4905)
211.6470 n	(P-4782)	218.101 n	(P-4905)
211.6490 n	(P-4782)	218.102 am	(P-4905)
211.6510 n	(P-4782)	218.103 am	(P-4905)
211.6530 n	(P-4782)	218.104 am	(P-4905)
211.6550 n	(P-4782)	218.105 am	(P-4905)
211.6570 n	(P-4782)	218.106 am	(P-4905) (P-12508)
211.6590 n	(P-4782)	218.107 am	(P-4905)
211.6610 n	(P-12491)	218.108 am	(P-12508)
211.6630 n	(P-12491)	218.109 am	(P-4905)
211.6650 n	(P-12491)	218.110 am	(P-4905)
211.6670 n	(P-4782)	218.111 am	(P-4905)
211.6690 n	(P-4782)	218.112 am	(P-4905) (P-12508)
211.6710 n	(P-12491)	218.113 n	(P-12508)
211.6730 n	(P-4782)	218.121 am	(P-4905)
211.6750 n	(P-4782)	218.122 am	(P-4905)
211.6770 n	(P-4782)	218.123 am	(P-4905)
211.6790 n	(P-4782)	218.124 am	(P-4905)
211.6810 n	(P-4782)	218.125 r	(P-4905)
211.6830 n	(P-12491)	218.126 r	(P-4905)
211.6850 n	(P-4782)	218.141 am	(P-4905)
211.6870 n	(P-4782)	218.143 am	(P-4905)
211.6890 n	(P-4782)	218.144 am	(P-4905)
211.6910 n	(P-4782)	218.182 am	(P-4905)
211.6930 n	(P-4782)	218.183 am	(P-4905)
211.6950 n	(P-4782)	218.184 am	(P-4905)
211.6970 n	(P-4782)	218.185 r	(P-4905)
211.6990 n	(P-4782)	218.186 am	(P-4905)
211.7010 n	(P-4782)	218.204 am	(P-4905)
211.7030 n	(P-4782)	218.205 am	(P-4905)
211.7050 n	(P-12491)	218.206 am	(P-4905)
211.7070 n	(P-4782)	218.207 am	(P-4905)
211.7090 n	(P-4782)	218.208 am	(P-4905)
211.7110 n	(P-4782)	218.209 am	(P-4905)
211.7130 n	(P-4782)	218.210 am	(P-4905)
211.7150 n	(P-4782)	218.211 am	(P-4905; C-6520)
211.7170 n	(P-4782)	218.301 am	(P-4905; C-6520)
211.7190 n	(P-4782)	218.302 am	(P-4905; C-6520)
211.7210 n	(P-4782)	218.303 am	(P-4905; C-6520)
211.7230 n	(P-4782)	218.304 am	(P-4905; C-6520)
211.7250 n	(P-4782)	218.401 am	(P-4905; C-6520)

ILLINOIS REGISTER

Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 35 (CONT'D)

218.402	am	(P-4905) (P-12508)	218.586	am	(P-4905)
218.403	am	(P-4905)	218.601	am	(P-4905)
218.404	am	(P-4905)	218.602	am	(P-4905) (P-12508)
218.405	am	(P-4905)	218.603	am	(P-4905)
218.421	am	(P-4905)	218.604	r	(P-4905)
218.422	am	(P-4905)	218.605	r	(P-4905)
218.423	am	(P-4905)	218.606	r	(P-4905)
218.424	am	(P-4905)	218.608	am	(P-4905)
218.425	am	(P-4905)	218.609	am	(P-4905)
218.426	am	(P-4905)	218.610	am	(P-4905)
218.427	am	(P-4905)	218.611	am	(P-4905) (P-12508)
218.428	am	(P-4905)	218.612	r	(P-4905)
218.429	am	(P-4905)	218.613	r	(P-4905)
218.430	r	(P-4905)	218.620	am	(P-4905) (P-12508)
218.441	am	(P-4905)	218.621	am	(P-4905)
218.443	am	(P-4905)	218.623	r	(P-4905)
218.445	am	(P-4905)	218.624	am	(P-4905)
218.446	am	(P-4905)	218.628	am	(P-4905)
218.447	am	(P-4905)	218.636	am	(P-4905)
218.449	am	(P-4905)	218.637	am	(P-4905)
218.450	am	(P-4905)	218.640	#	(P-4905)
218.452	am	(P-4905)	218.640	am	(P-4905)
218.453	r	(P-4905)	218.642	#	(P-4905)
218.461	am	(P-4905)	218.644	#	(P-4905)
218.462	am	(P-4905)	218.644	am	(P-4905)
218.463	am	(P-4905)	218.660	n	(P-12508)
218.464	am	(P-4905)	218.666	n	(P-12508)
218.465	r	(P-4905)	218.667	n	(P-12508)
218.466	r	(P-4905)	218.668	n	(P-12508)
218.480	am	(P-4905)	218.670	n	(P-12508)
218.481	am	(P-4905)	218.672	n	(P-12508)
218.482	am	(P-4905)	218.680	n	(P-12508)
218.483	am	(P-4905)	218.686	n	(P-12508)
218.486	am	(P-4905)	218.688	n	(P-12508)
218.487	am	(P-4905)	218.690	n	(P-12508)
218.489	am	(P-4905)	218.692	n	(P-12508)
218.521	r	(P-4905)	218.875	#	(P-4905)
218.525	am	(P-4905)	218.877	#	(P-4905)
218.527	r	(P-4905)	218.879	r	(P-4905)
218.541	am	(P-4905)	218.881	r	(P-4905)
218.562	am	(P-4905)	218.883	r	(P-4905)
218.581	am	(P-4905)	218.886	#	(P-4905)
218.582	am	(P-4905)	218.920	am	(P-4905) (P-12508)
218.583	am	(P-4905)	218.923	am	(P-4905)
218.584	am	(P-4905)	218.926	am	(P-12508)
218.585	am	(P-4905)	218.927	am	(P-4905) (P-12508)

SAI-21

ILLINOIS REGISTER

Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 35 (CONT'D)

218.928	am	(P-4905)	219.182	am	(P-5169)
218.940	am	(P-4905) (P-12508)	219.183	am	(P-5169)
218.943	am	(P-4905)	219.184	am	(P-5169)
	r	(P-12508)	219.185	r	(P-5169)
218.946	am	(P-4905) (P-12508)	219.186	am	(P-5169)
218.947	am	(P-4905)	219.204	am	(P-5169)
218.948	am	(P-4905)	219.205	am	(P-5169)
218.960	am	(P-4905) (P-12508)	219.206	am	(P-5169)
218.963	am	(P-4905)	219.207	am	(P-5169)
	r	(P-12508)	219.208	am	(P-5169)
218.966	am	(P-4905) (P-12508)	219.209	am	(P-5169)
218.967	am	(P-4905)	219.210	am	(P-5169)
218.968	am	(P-4905)	219.211	am	(P-5169)
218.980	am	(P-4905) (P-12508)	219.301	am	(P-5169)
218.983	am	(P-4905)	219.302	am	(P-5169)
	r	(P-12508)	219.303	am	(P-5169)
218.986	am	(P-4905) (P-12508)	219.304	am	(P-5169)
218.987	am	(P-4905)	219.401	am	(P-5169)
218.988	am	(P-4905)	219.402	am	(P-5169)
218.990	am	(P-4905)	219.403	am	(P-5169)
218.991	am	(P-4905) (P-12508)	219.404	am	(P-5169; C-6539)
218.Ap.A	am	(P-4905)	219.405	am	(P-5169)
218.Ap.B	am	(P-4905)	219.421	am	(P-5169)
218.Ap.C	am	(P-4905)	219.422	am	(P-5169)
218.Ap.D	am	(P-4905)	219.423	am	(P-5169)
219.100	am	(P-5169)	219.424	am	(P-5169)
219.101	r	(P-5169)	219.425	am	(P-5169)
219.101	n	(P-5169)	219.426	am	(P-5169)
219.102	am	(P-5169)	219.427	am	(P-5169)
219.104	am	(P-5169)	219.428	am	(P-5169)
219.105	am	(P-5169)	219.429	am	(P-5169)
219.106	am	(P-5169)	219.430	r	(P-5169)
219.107	am	(P-5169)	219.441	am	(P-5169)
219.109	am	(P-5169)	219.443	am	(P-5169)
219.110	am	(P-5169)	219.445	am	(P-5169)
219.111	am	(P-5169)	219.446	am	(P-5169)
219.112	am	(P-5169)	219.447	am	(P-5169)
219.121	am	(P-5169)	219.449	am	(P-5169)
219.122	am	(P-5169)	219.450	am	(P-5169)
219.123	am	(P-5169)	219.452	am	(P-5169)
219.124	am	(P-5169)	219.453	r	(P-5169)
219.125	r	(P-5169)	219.461	am	(P-5169)
219.126	r	(P-5169)	219.462	am	(P-5169)
219.141	am	(P-5169)	219.463	am	(P-5169)
219.143	am	(P-5169)	219.464	am	(P-5169)
219.144	am	(P-5169)	219.465	r	(P-5169)
219.181	am	(P-5169)	219.466	r	(P-5169)
	am	(P-5169)	219.480	am	(P-5169)

SAI-22

[illegible]

TITLE 35 (CONT'D)			320.104	n	(P-2469; A-11461)
253.204	r	(P-18139/92; A-9698)	320.105	n	(P-2469; A-11461)
254.101	n	(P-17195/92; A-7782)	320.201	n	(P-2469; A-11461)
254.102	n	(P-17195/92; A-7782)	320.202	n	(P-2469; A-11461)
254.103	n	(P-17195/92; A-7782)	320.203	n	(P-2469; A-11461)
254.104	n	(P-17195/92; A-7782)	320.204	n	(P-2469; A-11461)
254.105	n	(P-17195/92; A-7782)	320.301	n	(P-2469; A-11461)
254.106	n	(P-17195/92; A-7782)	320.302	n	(P-2469; A-11461)
254.107	n	(P-17195/92; A-7782)	604.101	r	(P-7621; A-12648)
254.108	n	(P-17195/92; A-7782)	604.102	r	(P-7621; A-12648)
254.109	n	(P-17195/92; A-7782)	604.103	r	(P-7621; A-12648)
254.110	n	(P-17195/92; A-7782)	604.104	r	(P-7621; A-12648)
254.111	n	(P-17195/92; A-7782)	604.105	r	(P-7621; A-12648)
254.112	n	(P-17195/92; A-7782)	604.401	r	(P-7621; A-12648)
254.130	n	(P-17195/92; A-7782)	605.101	r	(P-2682; A-7943)
254.131	n	(P-17195/92; A-7782)	605.102	r	(P-2682; A-7943)
254.132	n	(P-17195/92; A-7782)	605.109	r	(P-7738; A-12780)
254.133	n	(P-17195/92; A-7782)	611.101	am	(P-2533; A-7796)
254.134	n	(P-17195/92; A-7782)			
254.135	n	(P-17195/92; A-7782)	611.102	am	(P-2533; A-7796)
254.136	n	(P-17195/92; A-7782)			
254.201	n	(P-17195/92; A-7782)	611.107	n	(P-7629; A-12650)
254.202	n	(P-17195/92; A-7782)	611.110	am	(A-7796)
254.203	n	(P-17195/92; A-7782)			
254.204	n	(P-17195/92; A-7782)	611.111	am	(P-2533; A-7796)
254.301	n	(P-17195/92; A-7782)	611.112	am	(P-2533; A-7796)
254.302	n	(P-17195/92; A-7782)	611.113	am	(P-2533; A-7796)
254.303	n	(P-17195/92; A-7782)	611.130	n	(P-2533; A-7796)
254.304	n	(P-17195/92; A-7782)			
254.305	n	(P-17195/92; A-7782)	611.240	am	(P-7629; A-12650)
254.306	n	(P-17195/92; A-7782)	611.280	am	(P-2533; A-7796)
254.401	n	(P-17195/92; A-7782)	611.290	am	(P-2533; A-7796)
254.402	n	(P-17195/92; A-7782)	611.297	n	(P-2533; A-7796)
254.403	n	(P-17195/92; A-7782)	611.300	am	(P-2533; A-7796)
254.404	n	(P-17195/92; A-7782)			
304.213	am	(P-15223)	611.301	am	(P-7629; A-12650)
307.1103	am	(P-9803)			
307.2400	am	(P-9803)	611.310	am	(P-7629; A-12650)
307.2402	am	(P-9803)	611.311	am	(P-2533; A-7796)
307.2403	am	(P-9803)			
307.2405	am	(P-9803)	611.350	n	(P-2533; A-7796)
307.2406	am	(P-9803)	611.351	n	(P-2533; A-7796)
307.2407	am	(P-9803)	611.352	n	(P-2533; A-7796)
307.2490	am	(P-9803)	611.353	n	(P-2533; A-7796)
307.2491	am	(P-9803)	611.354	n	(P-2533; A-7796)
320.101	n	(P-2469; A-11461)	611.355	n	(P-2533; A-7796)
320.102	n	(P-2469; A-11461)	611.356	n	(P-2533; A-7796)
320.103	n	(P-2469; A-11461)			

ILLINOIS REGISTER

Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 35 (CONT'D)		703. Ap.A		(P-16930/92; A-5774)	
611.357	n		am	(P-9417)	
611.358	n		am	(P-16776/92; A-5625)	
611.359	n		am	(P-9170)	
			am	(P-9170)	
611.360	n		am	(P-9193)	
			am	(P-16801/92; A-5650)	
611.361	n		am	(P-9193)	
611.510	am		am	(P-16801/92; A-5650)	
611.521	am		am	(P-9193)	
611.560	am		am	(P-9193)	
611.600	am		am	(P-16801/92; A-5650)	
611.601	am		am	(P-9193)	
611.603	am		am	(P-9193)	
611.609	am		am	(P-9193)	
611.611	am		am	(P-9445)	
			am	(P-9453)	
611.612	am		am	(P-16970/92; A-5806)	
611.630	am		am	(P-9453)	
611.640	am		am	(P-16970/92; A-5806)	
			am	(P-9453)	
611.646	am		am	(P-16970/92; A-5806)	
			n	(P-9453)	
611.647	am		am	(P-16970/92; A-5806)	
611.648	am		am	(P-9453)	
			am	(P-9453)	
611. Ap.A	am		am	(P-9453)	
			am	(P-9453)	
611. Ap.E	n		am	(P-9453)	
611. Tb.D	#		am	(P-9453)	
611. Tb.D	n		am	(P-9453)	
611. Tb.E	n		am	(P-9453)	
611. Tb.F	n		am	(P-9453)	
611. Tb.G	n		am	(P-9453)	
611. Tb.Z	#		am	(P-9453)	
611. Tb.Z	am		am	(P-9453)	
			am	(P-16970/92; A-5806)	
615.105	am		am	(P-16970/92; A-5806)	
616.105	am		am	(P-16970/92; A-5806)	
702.181	am		am	(P-16970/92; A-5806)	
703.155	am		am	(P-9417)	
			am	(P-9417)	
703.183	am		am	(P-9417)	
703.203	am		am	(P-16930/92; A-5774)	
703.204	am		am	(P-16930/92; A-5774)	
703.207	am		am	(P-16930/92; A-5774)	
703.280	am		am	(P-9417)	

SAI-25

ILLINOIS REGISTER

Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 35 (CONT'D)		724.416		(P-9453)	
724.416	am		am	(P-9453)	
724.670	am		am	(P-9453)	
724.671	am		am	(P-9453)	
724.672	am		am	(P-9453)	
724.673	am		am	(P-16970/92; A-5806)	
			am	(P-9453)	
724.1100	n		am	(P-9453)	
724.1101	n		am	(P-9453)	
724.1102	n		am	(P-9453)	
725.101	am		am	(P-9245)	
725.113	am		am	(P-16831/92; A-5681)	
			am	(P-9245)	
725.115	am		am	(P-16831/92; A-5681)	
725.119	n		am	(P-16831/92; A-5681)	
725.173	am		am	(P-16831/92; A-5681)	
725.210	am		am	(P-9245)	
725.211	am		am	(P-9245)	
725.212	am		am	(P-9245)	
725.240	am		am	(P-9245)	
725.242	am		am	(P-9245)	
725.243	am		am	(P-9245)	
725.245	am		am	(P-9245)	
725.247	am		am	(P-9245)	
725.321	am		am	(P-16831/92; A-5681)	
			am	(P-9245)	
725.322	r		am	(P-16831/92; A-5681)	
725.322	n		am	(P-16831/92; A-5681)	
725.323	r		am	(P-16831/92; A-5681)	
725.323	n		am	(P-16831/92; A-5681)	
725.324	n		am	(P-16831/92; A-5681)	
725.326	am		am	(P-16831/92; A-5681)	
725.328	am		am	(P-16831/92; A-5681)	
725.354	am		am	(P-16831/92; A-5681)	
725.355	n		am	(P-16831/92; A-5681)	
725.359	n		am	(P-16831/92; A-5681)	
725.360	n		am	(P-16831/92; A-5681)	
725.401	am		am	(P-16831/92; A-5681)	
725.402	r		am	(P-16831/92; A-5681)	
725.402	n		am	(P-16831/92; A-5681)	
725.403	n		am	(P-16831/92; A-5681)	
725.404	n		am	(P-16831/92; A-5681)	
725.410	am		am	(P-16831/92; A-5681)	
725.414	am		am	(P-9245)	
725.416	am		am	(P-9245)	
725.540	am		am	(P-9245)	
725.541	am		am	(P-9245)	
725.542	am		am	(P-9245)	

SAI-26

TITLE 35 (CONT'D)

739.100	n	(P-9588)	810.103	am	(P-8702)
739.110	n	(P-9588)	810.104	am	(P-8702)
739.111	n	(P-9588)	811.101	am	(P-8726)
739.112	n	(P-9588)	811.171	am	(P-8726)
739.120	n	(P-9588)	811.110	am	(P-8726)
739.121	n	(P-9588)	811.111	am	(P-8726)
739.122	n	(P-9588)	811.112	n	(P-8726)
739.123	n	(P-9588)	811.302	am	(P-8726)
739.124	n	(P-9588)	811.310	am	(P-8726)
739.130	n	(P-9588)	811.313	am	(P-16962/92; A-12413)
739.131	n	(P-9588)	811.319	am	(P-8726)
739.132	n	(P-9588)	811.323	am	(P-8726)
739.140	n	(P-9588)	811.324	n	(P-8726)
739.141	n	(P-9588)	811.325	n	(P-8726)
739.142	n	(P-9588)	811.326	n	(P-8726)
739.143	n	(P-9588)	811.700	am	(P-8726)
739.144	n	(P-9588)	811.701	am	(P-8726)
739.145	n	(P-9588)	811.702	am	(P-8726)
739.146	n	(P-9588)	811.703	am	(P-8726)
739.147	n	(P-9588)	811.704	am	(P-8726)
739.150	n	(P-9588)	811.705	am	(P-8726)
739.151	n	(P-9588)	811.706	am	(P-8726)
739.152	n	(P-9588)	811.707	am	(P-8726)
739.153	n	(P-9588)	811.708	am	(P-8726)
739.154	n	(P-9588)	811.709	am	(P-8726)
739.155	n	(P-9588)	811.710	am	(P-8726)
739.156	n	(P-9588)	811.711	am	(P-8726)
739.157	n	(P-9588)	811.712	am	(P-8726)
739.158	n	(P-9588)	811.713	am	(P-8726)
739.159	n	(P-9588)	811.714	am	(P-8726)
739.160	n	(P-9588)	811.715	am	(P-8726)
739.161	n	(P-9588)	811.716	am	(P-8726)
739.162	n	(P-9588)	811.717	am	(P-8726)
739.163	n	(P-9588)	811.718	am	(P-8726)
739.164	n	(P-9588)	811.719	am	(P-8726)
739.165	n	(P-9588)	811.720	am	(P-8726)
739.166	n	(P-9588)	811.721	am	(P-8726)
739.167	n	(P-9588)	811.722	am	(P-8726)
739.170	n	(P-9588)	811.723	am	(P-8726)
739.171	n	(P-9588)	811.724	am	(P-8726)
739.172	n	(P-9588)	811.725	am	(P-8726)
739.173	n	(P-9588)	811.726	am	(P-8726)
739.174	n	(P-9588)	811.727	am	(P-8726)
739.175	n	(P-9588)	811.728	am	(P-8726)
739.180	n	(P-9588)	811.729	am	(P-8726)
739.181	n	(P-9588)	811.730	am	(P-8726)
739.182	n	(P-9588)	811.731	am	(P-8726)

SAI-27

TITLE 35 (CONT'D)

1420.103	n	(P-19625/92; A-9947)	180.94	n	(P-14006/92; A-123)
1420.104	n	(P-19625/92; A-9947)	180.100	am	(P-14006/92; A-123)
1420.105	n	(P-19625/92; A-9947)	190.35	n	(P-6599; W-13197)
1420.106	n	(P-19625/92; A-9947)	190.70	am	(P-6599; W-13197)
1420.107	n	(P-19625/92; A-9947)	190.75	n	(P-6599; W-13197)
1420.120	n	(P-19625/92; A-9947)	190.165	am	(P-6599; W-13197)
1421.101	n	(P-19615/92; A-10392)	400.110	re	(A-4464)
1421.110	n	(P-19615/92; A-10392)	400.120	re	(A-4464)
1421.111	n	(P-19615/92; A-10392)	400.130	re	(A-4464)
1421.120	n	(P-19615/92; A-10392)	400.140	re	(A-4464)
1421.121	n	(P-19615/92; A-10392)	400.141	re	(A-4464)
1421.130	n	(P-19615/92; A-10392)	400.142	re	(A-4464)
1421.131	n	(P-19615/92; A-10392)	400.143	re	(A-4464)
1421.140	n	(P-19615/92; A-10392)	400.150	re	(A-4464)
1421.141	n	(P-19615/92; A-10392)	400.205	re	(A-4464)
1421.142	n	(P-19615/92; A-10392)	400.210	re	(A-4464)
1421.143	n	(P-19615/92; A-10392)	400.220	re	(A-4464)
1421.144	n	(P-19615/92; A-10392)	400.230	re	(A-4464)
1421.145	n	(P-19615/92; A-10392)	400.240	re	(A-4464)
1421.146	n	(P-19615/92; A-10392)	400.250	re	(A-4464)
1421.147	n	(P-19615/92; A-10392)	400.260	re	(A-4464)
1421.148	n	(P-19615/92; A-10392)	400.270	re	(A-4464)
1421.149	n	(P-19615/92; A-10392)	400.280	re	(A-4464)
1421.150	n	(P-19615/92; A-10392)	400.290	re	(A-4464)
1421.151	n	(P-19615/92; A-10392)	400.310	re	(A-4464)
1421.152	n	(P-19615/92; A-10392)	400.410	re	(A-4464)
1421.153	n	(P-19615/92; A-10392)	400.420	re	(A-4464)
1421.154	n	(P-19615/92; A-10392)	400.430	re	(A-4464)
1421.155	n	(P-19615/92; A-10392)	400.440	re	(A-4464)
1421.156	n	(P-19615/92; A-10392)	400.510	re	(A-4464)
1421.157	n	(P-19615/92; A-10392)	400.610	re	(A-4464)
1421.158	n	(P-19615/92; A-10392)	400.615	re	(A-4464)
1421.159	n	(P-19615/92; A-10392)	400.620	re	(A-4464)
1421.160	n	(P-19615/92; A-10392)	400.630	re	(A-4464)
1421.161	n	(P-19615/92; A-10392)	400.640	re	(A-4464)
1421.162	n	(P-19615/92; A-10392)	400.650	re	(A-4464)
1421.163	n	(P-19615/92; A-10392)	400.660	re	(A-4464)
1421.164	n	(P-19615/92; A-10392)	400.665	re	(A-4464)
1421.165	n	(P-19615/92; A-10392)	400.670	re	(A-4464)
1421.166	n	(P-19615/92; A-10392)	400.675	re	(A-4464)
1421.167	n	(P-19615/92; A-10392)	400.680	re	(A-4464)
1421.168	n	(P-19615/92; A-10392)	400.690	re	(A-4464)
1421.169	n	(P-19615/92; A-10392)	400.700	re	(A-4464)
1421.170	n	(P-19615/92; A-10392)	400.710	re	(A-4464)
1421.171	n	(P-19615/92; A-10392)	400.720	re	(A-4464)
1421.172	n	(P-19615/92; A-10392)	400.810	re	(A-4464)
1421.173	n	(P-19615/92; A-10392)	400.910	re	(A-4464)
1421.174	n	(P-19615/92; A-10392)	400.1010	re	(A-4464)

SAI-28

ILLINOIS REGISTER

Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 38 (CONT'D)

400.1020	re	(A-4464)	400.1660	re	(A-4464)
400.1030	re	(A-4464)	400.1670	re	(A-4464)
400.1040	re	(A-4464)	400.1680	re	(A-4464)
400.1050	re	(A-4464)	400.1690	re	(A-4464)
400.1060	re	(A-4464)	400.1700	re	(A-4464)
400.1070	re	(A-4464)	400.1710	re	(A-4464)
400.1080	re	(A-4464)	400.1720	re	(A-4464)
400.1090	re	(A-4464)	400.1730	re	(A-4464)
400.1100	re	(A-4464)	400.1740	re	(A-4464)
400.1120	re	(A-4464)	400.1750	re	(A-4464)
400.1130	re	(A-4464)	400.1760	re	(A-4464)
400.1140	re	(A-4464)	400.1770	re	(A-4464)
400.1150	re	(A-4464)	400.1780	re	(A-4464)
400.1160	re	(A-4464)	400.1790	re	(A-4464)
400.1170	re	(A-4464)	400.1800	re	(A-4464)
400.1180	re	(A-4464)	400.1810	re	(A-4464)
400.1190	re	(A-4464)	400.1905	re	(A-4464)
400.1200	re	(A-4464)	400.1910	re	(A-4464)
400.1210	re	(A-4464)	400.1915	re	(A-4464)
400.1220	re	(A-4464)	400.1920	re	(A-4464)
400.1310	re	(A-4464)	400.1925	re	(A-4464)
400.1320	re	(A-4464)	400.1930	re	(A-4464)
400.1330	re	(A-4464)	400.1935	re	(A-4464)
400.1340	re	(A-4464)	400.1940	re	(A-4464)
400.1410	re	(A-4464)	400.1945	re	(A-4464)
400.1420	re	(A-4464)	400.1950	re	(A-4464)
400.1430	re	(A-4464)	400.1955	re	(A-4464)
400.1440	re	(A-4464)	400.1970	re	(A-4464)
400.1450	re	(A-4464)	400.1972	re	(A-4464)
400.1460	re	(A-4464)	400.1975	re	(A-4464)
400.1470	re	(A-4464)	400.1980	re	(A-4464)
400.1480	re	(A-4464)	400.1982	re	(A-4464)
400.1510	re	(A-4464)	400.1985	re	(A-4464)
400.1520	re	(A-4464)	400.1990	re	(A-4464)
400.1530	re	(A-4464)	400.1993	re	(A-4464)
400.1540	re	(A-4464)	400.1997	re	(A-4464)
400.1550	re	(A-4464)	400.2010	re	(A-4464)
400.1560	re	(A-4464)	400.2005	re	(A-4464)
400.1570	re	(A-4464)	400.2020	re	(A-4464)
400.1580	re	(A-4464)	400.2030	re	(A-4464)
400.1590	re	(A-4464)	400.2040	re	(A-4464)
400.1600	re	(A-4464)	400.2050	re	(A-4464)
400.1610	re	(A-4464)	400.2055	re	(A-4464)
400.1620	re	(A-4464)	400.2060	re	(A-4464)
400.1630	re	(A-4464)	400.2070	re	(A-4464)
400.1640	re	(A-4464)	400.2105	re	(A-4464)
400.1650	re	(A-4464)	400.2110	re	(A-4464)

SAI-29

ILLINOIS REGISTER

Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 38 (CONT'D)

400.2120	re	(A-4464)	450.270	re	(A-4475)
400.2200	re	(A-4464)	450.280	re	(A-4475)
400.2300	re	(A-4464)	450.290	re	(A-4475)
400.2310	re	(A-4464)	450.310	re	(A-4475)
400.2320	re	(A-4464)	450.320	re	(A-4475)
400.2330	re	(A-4464)	450.330	re	(A-4475)
400.2340	re	(A-4464)	450.340	re	(A-4475)
400.2400	re	(A-4464)	450.350	re	(A-4475)
400.2410	re	(A-4464)	450.410	am	(P-17570/92; A-3513)
400.2420	re	(A-4464)	450.410	re	(A-4475)
400.2500	re	(A-4464)	450.420	re	(A-4475)
400.2510	re	(A-4464)	450.425	n	(P-17570/92; A-3513)
400.2520	re	(A-4464)	450.425	re	(A-4475)
400.2530	re	(A-4464)	450.430	re	(A-4475)
400.2540	re	(A-4464)	450.440	re	(A-4475)
400.2550	re	(A-4464)	450.450	re	(A-4475)
400.2700	re	(A-4464)	450.460	re	(A-4475)
400.2710	re	(A-4464)	450.470	re	(A-4475)
450.110	re	(A-4475)	450.475	re	(A-4475)
450.115	re	(A-4475)	450.480	re	(A-4475)
450.120	re	(A-4475)	450.490	re	(A-4475)
450.125	re	(A-4475)	450.610	re	(A-4475)
450.130	re	(A-4475)	450.620	re	(A-4475)
450.135	n	(P-17570/92; A-3513)	450.630	re	(A-4475)
450.140	re	(A-4475)	450.640	re	(A-4475)
450.145	re	(A-4475)	450.650	re	(A-4475)
450.150	re	(A-4475)	450.660	re	(A-4475)
450.160	n	(P-17570/92; A-3513)	450.710	re	(A-4475)
450.165	n	(P-17570/92; A-3513)	450.720	re	(A-4475)
450.170	re	(A-4475)	450.730	re	(A-4475)
450.175	am	(P-17570/92; A-3513)	450.740	re	(A-4475)
450.185	re	(A-4475)	450.750	re	(A-4475)
450.210	am	(P-17570/92; A-3513)	450.810	re	(A-4475)
450.220	am	(A-4475)	450.820	re	(A-4475)
450.220	re	(A-4475)	450.830	re	(A-4475)
450.230	re	(A-4475)	450.840	re	(A-4475)
450.240	re	(A-4475)	450.850	re	(A-4475)
450.250	re	(A-4475)	450.860	re	(A-4475)
450.255	re	(A-4475)	450.910	re	(A-4475)
450.260	am	(P-17570/92; A-3513)	450.920	re	(A-4475)
450.260	re	(A-4475)	450.930	re	(A-4475)
			450.940	am	(P-17570/92; A-3513)
			450.950	re	(A-4475)
			450.1010	re	(A-4475)
			450.1020	am	(P-17570/92; A-3513)
			450.1020	re	(A-4475)
			450.1030	re	(A-4475)

SAI-30

TITLE 38 (CONT'D)		TITLE 38 (CONT'D)	
450.1110 re	(A-4475)	1000.810 re	(A-4464)
450.1120 re	(A-4475)	1000.910 re	(A-4464)
450.1130 re	(A-4475)	1000.1010 re	(A-4464)
450.1140 re	(A-4475)	1000.1020 re	(A-4464)
450.1150 re	(A-4475)	1000.1030 re	(A-4464)
450.1160 re	(A-4475)	1000.1040 re	(A-4464)
450.1170 re	(A-4475)	1000.1050 re	(A-4464)
450.1175 re	(A-4475)	1000.1060 re	(A-4464)
450.1210 re	(A-4475)	1000.1070 re	(A-4464)
450.1220 re	(A-4475)	1000.1080 re	(A-4464)
450.1230 re	(A-4475)	1000.1090 re	(A-4464)
450.1240 re	(A-4475)	1000.1110 re	(A-4464)
450.1250 re	(A-4475)	1000.1120 re	(A-4464)
450.1305 re	(A-4475)	1000.1130 re	(A-4464)
450.1310 re	(A-4475)	1000.1140 re	(A-4464)
450.1315 re	(A-4475)	1000.1150 re	(A-4464)
450.1320 re	(A-4475)	1000.1160 re	(A-4464)
450.1325 re	(A-4475)	1000.1170 re	(A-4464)
450.1330 re	(A-4475)	1000.1180 re	(A-4464)
450.1335 am	(P-17570/92; A-3513)	1000.1190 re	(A-4464)
450.1335 re	(A-4475)	1000.1200 re	(A-4464)
450.1340 re	(A-4475)	1000.1210 re	(A-4464)
450.1345 re	(A-4475)	1000.1220 re	(A-4464)
450.1350 re	(A-4475)	1000.1310 re	(A-4464)
450.1355 re	(A-4475)	1000.1320 re	(A-4464)
450.1360 re	(A-4475)	1000.1330 re	(A-4464)
450.1410 re	(A-4475)	1000.1340 re	(A-4464)
450.1420 re	(A-4475)	1000.1410 re	(A-4464)
450.1520 re	(A-4475)	1000.1420 re	(A-4464)
450.1530 re	(A-4475)	1000.1430 re	(A-4464)
450.1540 re	(A-4475)	1000.1440 re	(A-4464)
450.1550 re	(A-4475)	1000.1450 re	(A-4464)
450.1560 re	(A-4475)	1000.1460 re	(A-4464)
450.1570 re	(A-4475)	1000.1470 re	(A-4464)
450.1580 re	(A-4475)	1000.1480 re	(A-4464)
450.1590 re	(A-4475)	1000.1510 re	(A-4464)
450.1595 re	(A-4475)	1000.1520 re	(A-4464)
450.1600 re	(A-4475)	1000.1530 re	(A-4464)
450.1610 re	(A-4475)	1000.1540 re	(A-4464)
450.1620 re	(A-4475)	1000.1550 re	(A-4464)
450.1630 re	(A-4475)	1000.1560 re	(A-4464)
450.1640 re	(A-4475)	1000.1570 re	(A-4464)
450.1650 re	(A-4475)	1000.1580 re	(A-4464)
450.1660 re	(A-4475)	1000.1590 re	(A-4464)
450.1670 re	(A-4475)	1000.1600 re	(A-4464)
450.1680 re	(A-4475)	1000.1610 re	(A-4464)
		1000.1620 re	(A-4464)

TITLE 38 (CONT'D)		TITLE 38 (CONT'D)	
1000.1630 re	(A-4464)	1000.1630 re	(A-4464)
1000.1640 re	(A-4464)	1000.1640 re	(A-4464)
1000.1650 re	(A-4464)	1000.1650 re	(A-4464)
1000.1660 re	(A-4464)	1000.1660 re	(A-4464)
1000.1670 re	(A-4464)	1000.1670 re	(A-4464)
1000.1680 re	(A-4464)	1000.1680 re	(A-4464)
1000.1690 re	(A-4464)	1000.1690 re	(A-4464)
1000.1700 re	(A-4464)	1000.1700 re	(A-4464)
1000.1710 re	(A-4464)	1000.1710 re	(A-4464)
1000.1720 re	(A-4464)	1000.1720 re	(A-4464)
1000.1730 re	(A-4464)	1000.1730 re	(A-4464)
1000.1740 re	(A-4464)	1000.1740 re	(A-4464)
1000.1750 re	(A-4464)	1000.1750 re	(A-4464)
1000.1760 re	(A-4464)	1000.1760 re	(A-4464)
1000.1770 re	(A-4464)	1000.1770 re	(A-4464)
1000.1770 re	(A-4464)	1000.1770 re	(A-4464)
1000.1780 re	(A-4464)	1000.1780 re	(A-4464)
1000.1790 re	(A-4464)	1000.1790 re	(A-4464)
1000.1800 re	(A-4464)	1000.1800 re	(A-4464)
1000.1810 re	(A-4464)	1000.1810 re	(A-4464)
1000.1905 re	(A-4464)	1000.1905 re	(A-4464)
1000.1910 re	(A-4464)	1000.1910 re	(A-4464)
1000.1915 re	(A-4464)	1000.1915 re	(A-4464)
1000.1920 re	(A-4464)	1000.1920 re	(A-4464)
1000.1925 re	(A-4464)	1000.1925 re	(A-4464)
1000.1930 re	(A-4464)	1000.1930 re	(A-4464)
1000.1935 re	(A-4464)	1000.1935 re	(A-4464)
1000.1940 re	(A-4464)	1000.1940 re	(A-4464)
1000.1945 re	(A-4464)	1000.1945 re	(A-4464)
1000.1950 re	(A-4464)	1000.1950 re	(A-4464)
1000.1955 re	(A-4464)	1000.1955 re	(A-4464)
1000.1970 re	(A-4464)	1000.1970 re	(A-4464)
1000.1972 re	(A-4464)	1000.1972 re	(A-4464)
1000.1975 re	(A-4464)	1000.1975 re	(A-4464)
1000.1980 re	(A-4464)	1000.1980 re	(A-4464)
1000.1982 re	(A-4464)	1000.1982 re	(A-4464)
1000.1985 re	(A-4464)	1000.1985 re	(A-4464)
1000.1990 re	(A-4464)	1000.1990 re	(A-4464)
1000.1993 re	(A-4464)	1000.1993 re	(A-4464)
1000.1997 re	(A-4464)	1000.1997 re	(A-4464)
1000.2005 re	(A-4464)	1000.2005 re	(A-4464)
1000.2010 re	(A-4464)	1000.2010 re	(A-4464)
1000.2020 re	(A-4464)	1000.2020 re	(A-4464)
1000.2030 re	(A-4464)	1000.2030 re	(A-4464)
1000.2040 re	(A-4464)	1000.2040 re	(A-4464)
1000.2050 re	(A-4464)	1000.2050 re	(A-4464)
1000.2055 re	(A-4464)	1000.2055 re	(A-4464)
1000.2060 re	(A-4464)	1000.2060 re	(A-4464)

ILLINOIS REGISTER
SECTIONS AFFECTED INDEX September 24, 1993

Volume 17, Issue #39

TITLE 38 (CONT'D)			TITLE 38 (CONT'D)		
1000.2070	re	(A-4464)	1050.330	re	(A-4475)
1000.2105	re	(A-4464)	1050.340	re	(A-4475)
1000.2110	re	(A-4464)	1050.350	re	(A-4475)
1000.2120	re	(A-4464)	1050.410	re	(A-4475)
1000.2200	re	(A-4464)	1050.420	re	(A-4475)
1000.2300	re	(A-4464)	1050.425	re	(A-4475)
1000.2310	re	(A-4464)	1050.430	re	(A-4475)
1000.2320	re	(A-4464)	1050.440	re	(A-4475)
1000.2330	re	(A-4464)	1050.450	re	(A-4475)
1000.2340	re	(A-4464)	1050.460	re	(A-4475)
1000.2400	re	(A-4464)	1050.470	re	(A-4475)
1000.2410	re	(A-4464)	1050.475	re	(A-4475)
1000.2420	re	(A-4464)	1050.480	re	(A-4475)
1000.2500	re	(A-4464)	1050.490	re	(A-4475)
1000.2510	re	(A-4464)	1050.610	re	(A-4475)
1000.2520	re	(A-4464)	1050.620	re	(A-4475)
1000.2530	re	(A-4464)	1050.630	re	(A-4475)
1000.2540	re	(A-4464)	1050.640	re	(A-4475)
1000.2550	re	(A-4464)	1050.650	re	(A-4475)
1000.2700	re	(A-4464)	1050.660	re	(A-4475)
1000.2710	re	(A-4464)	1050.710	re	(A104475)
1050.110	re	(A-4475)	1050.720	re	(A-4475)
1050.115	re	(A-4475)	1050.730	re	(A-4475)
1050.120	re	(A-4475)	1050.740	re	(A-4475)
1050.125	re	(A-4475)	1050.750	re	(A-4475)
1050.130	re	(A-4475)	1050.810	re	(A-4475)
1050.135	re	(A-4475)	1050.820	re	(A-4475)
1050.140	re	(A-4475)	1050.830	re	(A-4475)
1050.145	re	(A-4475)	1050.840	re	(A-4475)
1050.150	re	(A-4475)	1050.850	re	(A-4475)
1050.160	re	(A-4475)	1050.860	re	(A-4475)
1050.165	re	(A-4475)	1050.910	re	(A-4475)
1050.170	re	(A-4475)	1050.920	re	(A-4475)
1050.175	re	(A-4475)	1050.930	re	(A-4475)
1050.185	re	(A-4475)	1050.940	re	(A-4475)
1050.210	re	(A-4475)	1050.950	re	(A-4475)
1050.220	re	(A-4475)	1050.1010	re	(A-4475)
1050.230	re	(A-4475)	1050.1020	re	(A-4475)
1050.240	re	(A-4475)	1050.1030	re	(A-4475)
1050.250	re	(A-4475)	1050.1110	re	(A-4475)
1050.255	re	(A-4475)	1050.1120	re	(A-4475)
1050.260	re	(A-4475)	1050.1130	re	(A-4475)
1050.270	re	(A-4475)	1050.1140	re	(A-4475)
1050.280	re	(A-4475)	1050.1150	re	(A-4475)
1050.290	re	(A-4475)	1050.1160	re	(A-4475)
1050.310	re	(A-4475)	1050.1170	re	(A-4475)
1050.320	re	(A-4475)	1050.1175	re	(A-4475)
			1050.1210	re	(A-4475)

ILLINOIS REGISTER

Volume 17, Issue #39

TITLE 38 (CONT'D)			TITLE 38 (CONT'D)		
1050.1220	re	(A-4475)	1075.1425	am	(P-2727; A-8894)
1050.1230	re	(A-4475)	1075.1700	n	(P-2727; A-8894)
1050.1240	re	(A-4475)	1075.1710	n	(P-2727; A-8894)
1050.1250	re	(A-4475)	1075.1800	n	(P-2727; A-8894)
1050.1305	re	(A-4475)	1075.1805	n	(P-2727; A-8894)
1050.1310	re	(A-4475)	1075.1810	n	(P-2727; A-8894)
1050.1315	re	(A-4475)	1075.1815	n	(P-2727; A-8894)
1050.1320	re	(A-4475)	1075.1820	n	(P-2727; A-8894)
1050.1325	re	(A-4475)	1075.1825	n	(P-2727; A-8894)
1050.1330	re	(A-4475)	1075.1830	n	(P-2727; A-8894)
1050.1335	re	(A-4475)	1075.1835	n	(P-2727; A-8894)
1050.1340	re	(A-4475)	1075.1840	n	(P-2727; A-8894)
1050.1345	re	(A-4475)	1075.1845	n	(P-2727; A-8894)
1050.1350	re	(A-4475)	1075.1850	n	(P-2727; A-8894)
1050.1355	re	(A-4475)	1075.1855	n	(P-2727; A-8894)
1050.1360	re	(A-4475)	1075.1860	n	(P-2727; A-8894)
1050.1410	re	(A-4475)	1075.1865	n	(P-2727; A-8894)
1050.1420	re	(A-4475)	1075.1870	n	(P-2727; A-8894)
1050.1510	re	(A-4475)	1075.1875	n	(P-2727; A-8894)
1050.1520	re	(A-4475)	1075.1880	n	(P-2727; A-8894)
1050.1530	re	(A-4475)	1075.1885	n	(P-2727; A-8894)
1050.1540	re	(A-4475)	1075.1890	n	(P-2727; A-8894)
1050.1550	re	(A-4475)	1075.1895	n	(P-2727; A-8894)
1050.1560	re	(A-4475)	1075.1900	n	(P-2727; A-8894)
1050.1570	re	(A-4475)	1075.1905	n	(P-2727; A-8894)
1050.1580	re	(A-4475)	1075.1910	n	(P-2727; A-8894)
1050.1590	re	(A-4475)	1075.1915	n	(P-2727; A-8894)
1050.1595	re	(A-4475)	1075.1920	n	(P-2727; A-8894)
1050.1600	re	(A-4475)	1075.1925	n	(P-2727; A-8894)
1050.1610	re	(A-4475)	1075.1930	n	(P-2727; A-8894)
1050.1620	re	(A-4475)	1075.1935	n	(P-2727; A-8894)
1050.1630	re	(A-4475)	1075.1940	n	(P-2727; A-8894)
1050.1640	re	(A-4475)	1075.1945	n	(P-2727; A-8894)
1050.1650	re	(A-4475)	1075.1950	n	(P-2727; A-8894)
1050.1660	re	(A-4475)	1075.1955	n	(P-2727; A-8894)
1050.1670	re	(A-4475)	1075.1960	n	(P-2727; A-8894)
1050.1680	re	(A-4475)	1075.1965	n	(P-2727; A-8894)
1050.1690	re	(A-4475)	1075.1970	n	(P-2727; A-8894)
1050.1700	re	(A-4475)	1075.1975	n	(P-2727; A-8894)
1050.1720	re	(A-4475)	1075.1980	n	(P-2727; A-8894)
1050.1730	re	(A-4475)	1075.1985	n	(P-2727; A-8894)
1050.1740	re	(A-4475)	1075.1990	n	(P-2727; A-8894)
1050.1750	re	(A-4475)	1075.1995	n	(P-2727; A-8894)
1050.1760	re	(A-4475)	1075.2000	n	(P-2727; A-8894)
1050.1770	re	(A-4475)	1075.2005	n	(P-2727; A-8894)
1050.1790	re	(A-4475)	1075.2010	n	(P-2727; A-8894)
1075.100	n	(P-2727; A-8894)	1075.2015	n	(P-2727; A-8894)

TITLE 50 (CONT'D)

916.50	am	(P-5992)	2012.10	am	(P-11279)
916.Ex.B	am	(P-5992)	2012.20	am	(P-11279)
916.Ex.C	n	(P-5992)	2012.25	am	(P-11279)
916.II.A	n	(P-5992)	2012.30	am	(P-11279)
916.II.B	n	(P-5992)	2012.40	am	(P-11279)
916.II.C	n	(P-5992)	2012.50	am	(P-11279)
920.10	r	(P-2530)	2012.55	am	(P-11279)
920.20	r	(P-2530)	2012.60	am	(P-11279)
927.10	am	(P-2106)	2012.65	am	(P-11279)
927.20	am	(P-2106)	2012.70	am	(P-11279)
927.30	am	(P-2106)	2012.80	am	(P-11279)
932.20	am	(P-2106)	2012.90	am	(P-11279)
		M-6893	2012.95	am	(P-11279)
932.40	am	(P-7279/92; O-1240;	2012.100	am	(P-11279)
		N-6893; A-6768)	2012.110	am	(P-11279)
932.60	am	(P-7279/92; O-1240;	2012.115	am	(P-11279)
		N-6893; A-6768)	2012.120	am	(P-11279)
939.10	am	(P-4768)	2012.122	am	(P-11279)
939.20	am	(P-4768)	2012.124	am	(P-11279)
939.30	am	(P-4768)	2012.126	am	(P-11279)
939.II.A	am	(P-4768)	2012.130	am	(P-11279)
939.II.B	am	(P-4768)	2012.140	am	(P-11279)
939.II.C	am	(P-4768)	2012.150	am	(P-11279)
939.II.D	am	(P-4768)	2012.Ex.D	am	(P-11279)
939.II.E	am	(P-4768)	2013.10	am	(P-10375/92; A-1525)
939.II.F	am	(P-4768)	2013.20	am	(P-10375/92; A-1525)
1103.10	n	(P-8411)	2013.30	am	(P-10375/92; A-1525)
1103.20	n	(P-8411)	2013.40	am	(P-10375/92; A-1525)
1103.30	n	(P-8411)	2013.50	am	(P-10375/92; A-1525)
1103.40	n	(P-8411)	2013.60	am	(P-10375/92; A-1525)
1103.50	n	(P-8411)	2013.70	am	(P-10375/92; A-1525)
1103.Ex.A	n	(P-8411)	2015.10	n	(P-696; A-8170)
1250.10	n	(P-3985)	2015.20	n	(P-696; A-8170)
1250.20	n	(P-3985)	2015.30	n	(P-696; A-8170)
1250.30	n	(P-3985)	2015.40	n	(P-696; A-8170)
1250.40	n	(P-3985)	2015.50	n	(P-696; A-8170)
1408.10	n	(P-8735/92; A-4195)	2015.60	n	(P-696; A-8170)
1408.20	n	(P-8735/92; A-4195)	6201.70	am	(P-14073)
1408.30	n	(P-8735/92; A-4195)	6201.75	n	(P-14073)
1408.40	n	(P-8735/92; A-4195)	7020.80	am	(P-14511/92; A-2206)
1408.50	n	(P-8735/92; A-4195)			
1408.60	n	(P-8735/92; A-4195)			
1408.70	n	(P-8735/92; A-4195)			
1408.80	n	(P-8735/92; A-4195)			
1408.90	n	(P-8735/92; A-4195)			
1408.II.A	n	(P-8735/92; A-4195)			
2008.73	am	(P-18917/92; A-11469)			

TITLE 56

350.280	am	(P-3780/92; O-180;
		R-1239; A-1074)
		(E-7072)
		(P-10; A-15556)
		(P-10; A-15556)
		(P-10; A-15556)
		(P-10; A-15556)

TITLE 56 (CONT'D)

2520.720	am	(P-10; A-15556)
2520.730	am	(P-10; A-15556)
2520.740	#	(P-10; A-15556)
2520.750	r	(P-10; A-15556)
2520.760	am	(P-10; A-15556)
2520.770	am	(P-10; A-15556)
2520.780	am	(P-10; A-15556)
2520.790	am	(P-10; A-15556)
2520.795	am	(P-10; A-15556)
2520.797	am	(P-10; A-15556)
2520.Ap.A	am	(P-10; A-15556)
2600.50	am	(P-17853/92; A-6483)
2712.201	am	(P-17853/92; A-3194)
2712.203	am	(P-17853/92; A-3194)
2712.205	am	(P-17853/92; A-3194)
2712.207	am	(P-17853/92; A-3194)
2720.100	am	(P-6919)
2720.110	r	(P-6919)
2720.115	am	(P-6919)
2720.135	am	(P-6919)
2720.145	am	(P-6919)
2732.225	n	(P-211; A-8809)
2732.227	n	(P-211; A-8809)
2732.30	n	(P-5985)
2760.126	n	(E-13798)
2765.5	am	(P-12006/92; A-308)
2765.50	am	(P-12006/92; A-308)
2765.64	n	(P-12006/92; A-308)
2765.66	am	(P-12006/92; A-308)
2765.70	r	(P-12006/92; A-308)
2765.71	n	(P-2523; A-10275)
2765.72	n	(E-13801)
2765.74	n	(P-12006/92; A-308)
2765.75	am	(P-12006/92; A-308)
2765.328	am	(P-15638/92; A-614)
2765.329	n	(P-15638/92; A-614)
2765.330	n	(P-15638/92; A-614)
2765.333	am	(P-15638/92; A-614)
2765.334	am	(P-15638/92; A-614)
2765.335	am	(P-15638/92; A-614)
2770.100	am	(P-15625/92; A-295)
2770.105	am	(P-15625/92; A-295)
2770.110	am	(P-15625/92; A-295)
2840.25	n	(P-886; A-10270)
2840.125	n	(P-8403)
2865.1	am	(P-6907)

TITLE 59

101.75	n	(P-10688)
103.10	am	(P-14078/92; A-10282)
103.11	n	(P-14078/92; A-10282)
103.15	n	(P-14078/92; A-10282)
103.20	am	(P-14078/92; A-10282)
103.25	n	(P-14078/92; A-10282)
103.30	n	(P-14078/92; A-10282)
103.40	r	(P-14078/92; A-10282)
103.50	am	(P-14078/92; A-10282)
103.60	n	(P-14078/92; A-10282)
103.65	am	(P-14078/92; A-10282)
103.70	am	(P-14078/92; A-10282)
103.80	am	(P-14078/92; A-10282)
103.90	am	(P-14078/92; A-10282)
103.95	n	(P-14078/92; A-10282)
103.100	am	(P-14078/92; A-10282)
103.110	am	(P-14078/92; A-10282)
103.120	am	(P-14078/92; A-10282)
103.130	am	(P-14078/92; A-10282)
103.140	r	(P-14078/92; A-10282)
103.150	am	(P-14078/92; A-10282)
103.160	am	(P-14078/92; A-10282)
103.165	n	(P-14078/92; A-10282)
103.170	am	(P-14078/92; A-10282)
103.180	am	(P-14078/92; A-10282)
103.190	am	(P-14078/92; A-10282)
103.200	r	(P-14078/92; A-10282)
103.210	n	(P-14078/92; A-10282)
103.220	am	(P-6397)
103.260	am	(P-6397)
103.270	n	(P-6397)
103.300	am	(P-6397)
121.10	n	(P-15715/92; RC-3689;
		A-4261)
121.15	n	(P-15715/92; RC-3689;
		A-4261)
121.20	n	(P-15715/92; RC-3689;
		A-4261)

ILLINOIS REGISTER
Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 59 (CONT'D)	121.25	n	(P-15715/92; RC-3689; A-4261)	121.145	n	(P-15715/92; RC-3689; A-4261)	1779.19	am	(P-10835/92; A-11118)
	121.30	n	(P-15715/92; RC-3689; A-4261)	121.145	n	(P-15715/92; RC-3689; A-4261)	1780.21	am	(P-10839/92; A-11122)
	121.35	n	(P-15715/92; RC-3689; A-4261)	122.10	n	(P-15691/92; RC-3688; A-4236)	1780.33	am	(P-10839/92; A-11122)
	121.40	n	(P-15715/92; RC-3689; A-4261)	122.15	n	(P-15691/92; RC-3688; A-4236)	1780.38	am	(P-10849/92; A-11131)
	121.45	n	(P-15715/92; RC-3689; A-4261)	122.20	n	(P-15691/92; RC-3688; A-4236)	1783.19	am	(P-10853/92; A-11135)
	121.50	n	(P-15715/92; RC-3689; A-4261)	122.25	n	(P-15691/92; RC-3688; A-4236)	1784.14	am	(P-10853/92; A-11135)
	121.55	n	(P-15715/92; RC-3689; A-4261)	122.30	n	(P-15691/92; RC-3688; A-4236)	1784.18	am	(P-10853/92; A-11135)
	121.60	n	(P-15715/92; RC-3689; A-4261)	122.31	n	(P-15691/92; RC-3688; A-4236)	1784.27	r	(P-10853/92; A-11135)
	121.65	n	(P-15715/92; RC-3689; A-4261)	122.35	n	(P-15691/92; RC-3688; A-4236)	1785.13	am	(P-10784/92; A-11075)
	121.70	n	(P-15715/92; RC-3689; A-4261)	122.40	n	(P-15691/92; RC-3688; A-4236)	1800.11	am	(P-10607/92; A-10916)
	121.75	n	(P-15715/92; RC-3689; A-4261)	122.45	n	(P-15691/92; RC-3688; A-4236)	1800.40	am	(P-10607/92; A-10916)
	121.80	n	(P-15715/92; RC-3689; A-4261)	122.50	n	(P-15691/92; RC-3688; A-4236)	1800.50	am	(P-10607/92; A-10916)
	121.85	n	(P-15715/92; RC-3689; A-4261)	122.55	n	(P-15691/92; RC-3688; A-4236)	1816.42	am	(P-10695/92; A-11001)
	121.90	n	(P-15715/92; RC-3689; A-4261)	122.60	n	(P-15691/92; RC-3688; A-4236)	1816.43	am	(P-10695/92; A-11001)
	121.95	n	(P-15715/92; RC-3689; A-4261)	122.65	n	(P-15691/92; RC-3688; A-4236)	1816.49	am	(P-10695/92; A-11001)
	121.100	n	(P-15715/92; RC-3689; A-4261)	122.70	n	(P-15691/92; RC-3688; A-4236)	1816.84	am	(P-10695/92; A-11001)
	121.105	n	(P-15715/92; RC-3689; A-4261)	122.75	n	(P-15691/92; RC-3688; A-4236)	1816.116	am	(P-10695/92; A-11001)
	121.110	n	(P-15715/92; RC-3689; A-4261)	122.80	n	(P-15691/92; RC-3688; A-4236)	1816.117	am	(P-10695/92; A-11001)
	121.115	n	(P-15715/92; RC-3689; A-4261)	122.85	n	(P-15691/92; RC-3688; A-4236)	1816.151	am	(P-10695/92; A-11001)
	121.120	n	(P-15715/92; RC-3689; A-4261)	122.90	n	(P-15691/92; RC-3688; A-4236)	1817.42	am	(P-10726/92; A-11031)
	121.130	n	(P-15715/92; RC-3689; A-4261)	122.95	n	(P-15691/92; RC-3688; A-4236)	1817.43	am	(P-10726/92; A-11031)
	121.135	n	(P-15715/92; RC-3689; A-4261)	123.00	n	(P-15691/92; RC-3688; A-4236)	1817.49	am	(P-10726/92; A-11031)
	121.140	n	(P-15715/92; RC-3689; A-4261)	123.05	n	(P-15691/92; RC-3688; A-4236)	1817.84	am	(P-10726/92; A-11031)
				123.10	n	(P-15691/92; RC-3688; A-4236)	1817.116	am	(P-10726/92; A-11031)
				123.15	n	(P-15691/92; RC-3688; A-4236)	1817.117	am	(P-10726/92; A-11031)
				123.20	n	(P-15691/92; RC-3688; A-4236)	1817.151	am	(P-10726/92; A-11031)
				123.25	n	(P-15691/92; RC-3688; A-4236)	1817.182	am	(P-10726/92; A-11031)
				123.30	n	(P-15691/92; RC-3688; A-4236)	1827.12	am	(P-10803/92; A-11091)
				123.35	n	(P-15691/92; RC-3688; A-4236)	1843.12	am	(P-10807/92; A-11095)
				123.40	n	(P-15691/92; RC-3688; A-4236)	1843.13	am	(P-10807/92; A-11095)
				123.45	n	(P-15691/92; RC-3688; A-4236)	1843.15	am	(P-10807/92; A-11095)
				123.50	n	(P-15691/92; RC-3688; A-4236)	1843.16	r	(P-10807/92; A-11095)
				123.55	n	(P-15691/92; RC-3688; A-4236)	1843.17	r	(P-10807/92; A-11095)
				123.60	n	(P-15691/92; RC-3688; A-4236)	1843.20	r	(P-10807/92; A-11095)
				123.65	n	(P-15691/92; RC-3688; A-4236)	1843.21	r	(P-10807/92; A-11095)
				123.70	n	(P-15691/92; RC-3688; A-4236)	1845.12	am	(P-10619/92; A-10926)
				123.75	n	(P-15691/92; RC-3688; A-4236)	1845.13	am	(P-10619/92; A-10926)
				123.80	n	(P-15691/92; RC-3688; A-4236)	1845.17	am	(P-10619/92; A-10926)
				123.85	n	(P-15691/92; RC-3688; A-4236)	1845.18	am	(P-10619/92; A-10926)
				123.90	n	(P-15691/92; RC-3688; A-4236)	1845.19	am	(P-10619/92; A-10926)
				123.95	n	(P-15691/92; RC-3688; A-4236)	1846.17	am	(P-10619/92; A-10926)
				124.00	n	(P-15691/92; RC-3688; A-4236)	1846.18	am	(P-10619/92; A-10926)
				124.05	n	(P-15691/92; RC-3688; A-4236)	1847.1	n	(P-10691/92; A-10997)
				124.10	n	(P-15691/92; RC-3688; A-4236)	1847.11	n	(P-10596/92; A-10887)
				124.15	n	(P-15691/92; RC-3688; A-4236)	1847.2	n	(P-10596/92; A-10887)
				124.20	n	(P-15691/92; RC-3688; A-4236)	1847.3	n	(P-10596/92; A-10887)
				124.25	n	(P-15691/92; RC-3688; A-4236)	1847.4	n	(P-10596/92; A-10887)

ILLINOIS REGISTER
Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 59 (CONT'D)	400.90	n	(P-11996; A-11151)	1779.19	am	(P-10835/92; A-11118)
	400.100	n	(P-11996; A-11151)	1780.21	am	(P-10839/92; A-11122)
	400.110	n	(P-11996; A-11151)	1780.33	am	(P-10839/92; A-11122)
	400.120	n	(P-11996; A-11151)	1780.38	am	(P-10849/92; A-11131)
				1783.19	am	(P-10853/92; A-11135)
				1784.14	am	(P-10853/92; A-11135)
				1784.18	am	(P-10853/92; A-11135)
				1784.27	r	(P-10853/92; A-11135)
				1785.13	am	(P-10784/92; A-11075)
				1800.11	am	(P-10607/92; A-10916)
				1800.40	am	(P-10607/92; A-10916)
				1800.50	am	(P-10607/92; A-10916)
				1816.42	am	(P-10695/92; A-11001)
				1816.43	am	(P-10695/92; A-11001)
				1816.49	am	(P-10695/92; A-11001)
				1816.84	am	(P-10695/92; A-11001)
				1816.116	am	(P-10695/92; A-11001)
				1816.117	am	(P-10695/92; A-11001)
				1816.151	am	(P-10695/92; A-11001)
				1817.42	am	(P-10726/92; A-11031)
				1817.43	am	(P-10726/92; A-11031)
				1817.49	am	(P-10726/92; A-11031)
				1817.84	am	(P-10726/92; A-11031)
				1817.116	am	(P-10726/92; A-11031)
				1817.117	am	(P-10726/92; A-11031)
				1817.151	am	(P-10726/92; A-11031)
				1817.182	am	(P-10726/92; A-11031)
				1827.12	am	(P-10803/92; A-11091)
				1843.12	am	(P-10807/92; A-11095)
				1843.13	am	(P-10807/92; A-11095)
				1843.14	am	(P-10807/92; A-11095)
				1843.15	am	(P-10807/92; A-11095)
				1843.16	r	(P-10807/92; A-11095)
				1843.17	r	(P-10807/92; A-11095)
				1843.20	r	(P-10807/92; A-11095)
				1843.21	r	(P-10807/92; A-11095)
				1845.12	am	(P-10619/92; A-10926)
				1845.13	am	(P-10619/92; A-10926)
				1845.17	am	(P-10619/92; A-10926)
				1845.18	am	(P-10619/92; A-10926)
				1845.19	am	(P-10619/92; A-10926)
				1846.17	am	(P-10619/92; A-10926)
				1846.18	am	(P-10619/92; A-10926)
				1847.1	n	(P-10691/92; A-10997)
				1847.11	n	(P-10596/92; A-10887)
				1847.2	n	(P-10596/92; A-10887)
				1847.3	n	(P-10596/92; A-10887)
				1847.4	n	(P-10596/92; A-10887)

TITLE 62 (CONT'D)

1847.5	n	(P-10596/92; A-10887)	1210.10	am	(P-16374/92; A-1535)
1847.6	n	(P-10596/92; A-10887)	1210.20	am	(P-16374/92; A-1535)
1847.7	n	(P-10596/92; A-10887)	1210.25	n	(P-16374/92; A-1535)
1847.8	n	(P-10596/92; A-10887)	1210.30	r	(P-16374/92; A-1535)
1847.9	n	(P-10596/92; A-10887)	1210.40	r	(P-16374/92; A-1535)
1848.1	n	(P-10669/92; A-10973)	1210.50	r	(P-16374/92; A-1535)
1848.2	n	(P-10669/92; A-10973)	1210.60	am	(P-16374/92; A-1535)
1848.3	n	(P-10669/92; A-10973)	1210.70	am	(P-16374/92; A-1535)
1848.4	n	(P-10669/92; A-10973)	1210.80	am	(P-16374/92; A-1535)
1848.5	n	(P-10669/92; A-10973)	1210.90	am	(P-16374/92; A-1535)
1848.6	n	(P-10669/92; A-10973)	1210.100	r	(P-16374/92; A-1535)
1848.7	n	(P-10669/92; A-10973)	1210.105	n	(P-16374/92; A-1535)
1848.8	n	(P-10669/92; A-10973)	1210.110	am	(P-16374/92; A-1535)
1848.9	n	(P-10669/92; A-10973)	1210.120	r	(P-16374/92; A-1535)
1848.11	n	(P-10669/92; A-10973)	1210.130	r	(P-16374/92; A-1535)
1848.12	n	(P-10669/92; A-10973)	1210.140	am	(P-16374/92; A-1535)
1848.13	n	(P-10669/92; A-10973)	1210.150	am	(P-16374/92; A-1535)
1848.15	n	(P-10669/92; A-10973)	1210.160	am	(P-16374/92; A-1535)
1848.16	n	(P-10669/92; A-10973)	1210.170	am	(P-16374/92; A-1535)
1848.17	n	(P-10669/92; A-10973)	1210.180	am	(P-16374/92; A-1535)
1848.18	n	(P-10669/92; A-10973)	1210.190	am	(P-16374/92; A-1535)
1848.19	n	(P-10669/92; A-10973)	1210.200	r	(P-16374/92; A-1535)
1848.20	n	(P-10669/92; A-10973)	1210.210	r	(P-16374/92; A-1535)
1848.21	n	(P-10669/92; A-10973)	1210.220	r	(P-16374/92; A-1535)
1848.22	n	(P-10669/92; A-10973)	1210.230	r	(P-16374/92; A-1535)
1848.130	am	(P-4149; A-11162)	1210.235	am	(P-16374/92; A-1535)
1848.150	am	(P-4149; A-11162)	1210.240	am	(P-16374/92; A-1535)
1848.190	am	(P-4149; A-11162)	1210.250	r	(P-16374/92; A-1535)
			1220.100	n	(P-8127) (E-8309)
			1220.110	am	(P-8127) (E-8309)
			1220.120	am	(P-8127) (E-8309)
			1220.160	am	(P-15762/92; A-1559)
			1220.170	n	(P-15762/92; A-1559)
			1220.220	am	(P-8127) (E-8309)
			1220.240	am	(P-8127)
			1220.260	am	(P-15762/92; A-1559)
			1220.270	n	(P-15762/92; A-1559)
			1220.360	n	(P-15762/92; A-1559)
			1220.435	r	(P-15762/92; A-1559)
			1220.440	n	(P-15762/92; A-1559)
			1220.525	n	(P-15762/92; A-1559)
			1220.4p.B	am	(P-1708)
			1220.4p.C	am	(P-1708)
			1240.5	r	(P-15775/92; A-1579)
			1240.10	am	(P-15775/92; A-1579)
			1240.15	am	(P-15775/92; A-1579)
			1240.50	am	(P-15775/92; A-1579)
			1240.51	am	(P-15775/92; A-1579)

TITLE 68 (CONT'D)

1455.50	n	(P-11315)	1250.110	am	(P-11315)
1455.60	n	(P-11315)	1250.120	am	(P-11315)
1455.70	n	(P-11315)	1250.130	am	(P-11315)
1455.200	n	(P-11315)	1250.135	am	(P-11315)
1455.210	n	(P-11315)	1250.140	am	(P-11315)
1455.300	n	(P-11315)	1250.150	am	(P-11315)
1455.310	n	(P-11315)	1250.155	am	(P-11315)
1465.10	r	(P-11315)	1250.160	am	(P-11315)
1465.30	am	(P-11315)	1250.170	am	(P-11315)
1465.35	n	(P-11315)	1250.200	am	(P-11315)
1465.36	n	(P-11315)	1250.205	am	(P-11315)
1465.80	n	(P-11315)	1250.210	am	(P-11315)
1465.90	am	(P-11315)	1250.220	am	(P-11315)
1470.5	r	(P-14550)	1270.5	am	(P-14550)
1470.7	r	(P-14550)	1270.10	am	(P-14550)
1470.20	am	(P-14550)	1270.13	am	(P-14550)
1470.80	am	(P-9624)	1285.20	am	(P-9624)
1470.90	am	(P-9624)	1285.50	am	(P-9624)
1480.130	am	(P-9624)	1285.60	am	(P-9624)
1480.150	am	(P-9624)	1285.70	am	(P-9624)
1480.190	am	(P-9624)	1285.80	am	(P-9624)
			1285.90	am	(P-9624)
			1285.91	n	(P-9624)
			1285.100	am	(P-9624)
			1285.101	n	(P-9624)
			1300.48	am	(P-16484/92; A-1572)
			1310.30	am	(P-8139)
			1310.60	am	(P-8139)
			1320.30	am	(P-6729)
			1320.40	am	(P-6729)
			1320.50	am	(P-6729)
			1320.70	am	(P-6729)
			1320.80	am	(P-6729)
			1320.100	am	(P-6729)
			1320.300	am	(P-14559)
			1340.40	am	(P-8444; A-14606)
			1340.60	am	(P-8444; A-14606)
			1430.3010	am	(P-4141; A-13487)
			1430.3020	am	(P-4141; A-13487)
			1430.5030	am	(P-4141; A-13487)
			1430.5050	am	(P-4141; A-13487)
			1455.10	n	(P-15785/92; A-1589)
			1455.15	n	(P-15785/92; A-1589)
			1455.20	n	(P-15785/92; A-1589)
			1455.30	n	(P-15785/92; A-1589)
			1455.30	am	(P-6612) (E-6668)
			1455.40	n	(P-15785/92; A-1589)

TITLE 71

500.10	n	(P-3917)
500.20	n	(P-3917)
500.30	n	(P-3917)
500.40	n	(P-3917)
500.50	n	(P-3917)
500.60	n	(P-3917)
500.70	n	(P-3917)
500.80	n	(P-3917)

TITLE 74

330.10	n	(P-10686) (E-11170)
330.20	n	(P-10686) (E-11170)
330.30	n	(P-10686) (E-11170)
330.40	n	(P-10686) (E-11170)
330.50	n	(P-10686) (E-11170)
330.60	n	(P-10686) (E-11170)
330.70	n	(P-10686) (E-11170)
330.80	n	(P-10686) (E-11170)
330.90	n	(P-10686) (E-11170)
330.100	n	(P-10686) (E-11170)
330.110	n	(P-10686) (E-11170)
330.120	n	(P-10686) (E-11170)
330.130	n	(P-10686) (E-11170)
330.140	n	(P-10686) (E-11170)

ILLINOIS REGISTER
SECTIONS AFFECTED INDEX September 24, 1993

Volume 17, Issue #39

TITLE 74 (CONT'D)		TITLE 77		
730.10 n	(P-1671; O-3057)	100.1	am	(P-12153)
730.10 r	(P-3831; A-9999)	100.2	am	(P-12153)
730.20 n	(P-3831; A-9999)	100.3	am	(P-12153)
730.30 n	(P-3831; A-9999)	100.4	am	(P-12153)
730.40 n	(P-3831; A-9999)	100.5	am	(P-12153)
740.5 n	(P-585; A-6663)	100.6	am	(P-12153)
740.10 am	(P-585; A-6663)	100.7	am	(P-12153)
740.20 am	(P-585; A-6663)	100.8	am	(P-12153)
740.30 n	(P-585; A-6663)	100.9	am	(P-12153)
750.10 r	(P-762; A-9079)	100.10	am	(P-12153)
750.10 n	(P-777; A-9081)	100.11	am	(P-12153)
750.20 r	(P-762; A-9079)	100.12	am	(P-12153)
750.20 n	(P-777; A-9081)	100.13	am	(P-12153)
750.30 r	(P-762; A-9079)	100.14	am	(P-12153)
750.30 n	(P-777; A-9081)	100.15	am	(P-12153)
750.40 r	(P-762; A-9079)	100.16	am	(P-12153)
750.40 n	(P-777; A-9081)	100.17	am	(P-12153)
750.41 r	(P-762; A-9079)	100.18	n	(P-12153)
750.50 r	(P-762; A-9079)	100.19	n	(P-12153)
750.50 n	(P-777; A-9081)	205.620	am	(P-3426/92; A-3507)
750.60 r	(P-762; A-9079)	245.40	am	(P-747)
750.60 n	(P-777; A-9081)	250.2720	n	(P-2016/92; A-1614)
750.70 r	(P-762; A-9079)	270.1000	n	(P-9654)
750.70 n	(P-777; A-9081)	270.1050	n	(P-9654)
750.80 r	(P-762; A-9079)	270.1100	n	(P-9654)
750.80 n	(P-777; A-9081)	270.1200	n	(P-9654)
750.90 r	(P-762; A-9079)	270.1300	n	(P-9654)
750.90 n	(P-777; A-9081)	270.1400	n	(P-9654)
750.100 r	(P-762; A-9079)	270.1500	n	(P-9654)
750.110 n	(P-777; A-9081)	270.1600	n	(P-9654)
750.120 r	(P-762; A-9079)	270.1700	n	(P-9654)
750.120 n	(P-777; A-9081)	270.1800	n	(P-9654)
750.130 r	(P-762; A-9079)	270.1900	n	(P-9654)
750.130 n	(P-777; A-9081)	270.2000	n	(P-9654)
750.140 r	(P-762; A-9079)	270.2100	n	(P-9654)
750.140 n	(P-777; A-9081)	270.2200	n	(P-9654)
750.150 n	(P-762; A-9079)	270.2300	n	(P-9654)
750.150 n	(P-777; A-9081)	300.140	am	(P-12205)
750.160 r	(P-762; A-9079)	300.150	am	(P-12205)
750.160 n	(P-777; A-9081)	300.160	am	(P-12205)
750.170 r	(P-762; A-9079)	300.175	am	(P-1346)
750.170 n	(P-777; A-9081)	300.180	am	(P-1346)
750.180 r	(P-762; A-9079)	300.260	am	(E-2420) (P-6074; A-15106)
750.180 n	(P-777; A-9081)	300.270	am	(P-1346)
900 n	(P-10677) (E-11168)			

ILLINOIS REGISTER

SECTIONS AFFECTED INDEX September 24, 1993

TITLE 77 (CONT'D)				
300.271 n	(E-2420) (P-6074; A-15106)	350.278	am	(E-2373) (P-6028; A-15056)
300.278 am	(E-2420) (P-6074; A-15106)	350.282	am	(P-12104)
300.282 am	(P-12205)	350.290	am	(E-2373) (P-6028; A-15056)
300.290 am	(E-2420) (P-6074; A-15106)	350.330	am	(E-7948) (P-10144)
300.330 am	(E-8026) (P-10225)	350.640	am	(P-1269)
300.630 am	(P-1346)	350.680	am	(P-1269)
300.660 am	(P-1346)	350.685	am	(P-1269)
300.665 am	(P-1346)	350.2660	am	(P-12104)
300.2860 am	(P-12205)	350.3210	am	(P-1269)
300.3210 am	(P-1346)	350.3330	am	(P-1269)
300.3330 am	(P-1346)	350.3730	am	(P-4791/92; A-2351)
330.120 am	(P-12188)	350. Ap.A	r	(P-8781) (E-9105)
330.140 am	(P-12188)	370.520	am	(P-1269)
330.150 am	(P-12188)	390.110	am	(P-8793) (E-9117)
330.160 am	(P-12188)	390.120	am	(P-12128)
330.175 am	(P-1321)	390.150	am	(P-12128)
330.180 am	(P-1321)	390.160	am	(P-12128)
330.260 am	(E-2405) (P-6059; A-15089)	390.175	am	(P-1296)
330.270 am	(P-1321)	390.180	am	(P-1296)
330.271 n	(E-2405) (P-6059; A-15089)	390.260	am	(E-2390) (P-6044; A-15073)
330.278 am	(E-2405) (P-6059; A-15089)	390.270	am	(P-1296)
330.282 am	(E-2405) (P-6059; A-15089)	390.271	n	(E-2390) (P-6044; A-15073)
330.290 am	(E-2405) (P-6059; A-15089)	390.278	am	(E-2390) (P-6044; A-15073)
330.330 am	(E-8000) (P-10198)	390.282	am	(P-12128)
330.730 am	(P-1321)	390.290	am	(E-2390) (P-6044; A-15073)
330.916 r	(P-1321)	390.330	am	(E-7974) (P-10171)
330.4210 am	(P-1321)	390.640	am	(P-1296)
330.4330 am	(P-1321)	390.680	am	(P-1296)
350.110 am	(P-12104)	390.685	am	(P-1296)
350.120 am	(P-12104)	390.2660	am	(P-12128)
350.140 am	(P-12104)	390.3210	am	(P-1296)
350.150 am	(P-12104)	390.3330	am	(P-1296)
350.160 am	(P-12104)	395.100	am	(P-8066/92; A-2984)
350.175 am	(P-1269)	395.110	am	(P-8066/92; A-2984)
350.180 am	(P-1269)	395.120	am	(P-8066/92; A-2984)
350.260 am	(E-2373) (P-6028; A-15056)	395.130	am	(P-8066/92; A-2984)
350.270 am	(P-1269)	395.140	am	(P-8066/92; A-2984)
350.271 n	(E-2373) (P-6028; A-15056)	395.150	am	(P-8066/92; A-2984)
	(E-2373) (P-6028; A-15056)	395.160	am	(P-8066/92; A-2984)
		395.170	am	(P-8066/92; A-2984)

TITLE 77 (CONT'D)			r	(E-13115) (P-14831)	(E-13115) (P-14831)
600.210	r	(E-13115) (P-14831)	600.1150	r	(E-13115) (P-14831)
	n	(E-12918) (P-14806)	600.1160	r	(E-13115) (P-14831)
600.220	n	(E-13115) (P-14831)	600.1170	r	(E-13115) (P-14831)
600.230	r	(E-13115) (P-14831)	600.1200	r	(E-13115) (P-14831)
600.240	r	(E-13115) (P-14831)	600.1210	r	(E-13115) (P-14831)
600.250	r	(E-13115) (P-14831)	600.1220	r	(E-13115) (P-14831)
600.260	r	(E-13115) (P-14831)	600.1300	r	(E-13115) (P-14831)
600.300	r	(E-13115) (P-14831)	600.1310	r	(E-13115) (P-14831)
	n	(E-12918) (P-14806)	600.1400	r	(E-13115) (P-14831)
600.310	r	(E-13115) (P-14831)	600.1410	r	(E-13115) (P-14831)
	n	(E-12918) (P-14806)	600.1500	r	(E-13115) (P-14831)
600.320	r	(E-13115) (P-14831)	600.1600	r	(E-13115) (P-14831)
	n	(E-12918) (P-14806)	600.1610	r	(E-13115) (P-14831)
600.330	r	(E-13115) (P-14831)	610.100	n	(E-12936) (P-14824)
	n	(E-12918) (P-14806)	610.110	n	(E-12936) (P-14824)
600.340	r	(E-13115) (P-14831)	610.200	n	(E-12936) (P-14824)
600.400	r	(E-13115) (P-14831)	610.210	n	(E-12936) (P-14824)
	n	(E-12918) (P-14806)	610.300	n	(E-12936) (P-14824)
600.410	r	(E-13115) (P-14831)	610.310	n	(E-12936) (P-14824)
	n	(E-12918) (P-14806)	610.320	n	(E-12936) (P-14824)
600.420	r	(E-13115) (P-14831)	615.100	r	(E-12944)
600.500	r	(E-13115) (P-14831)		n	(E-13002)
	n	(E-12918) (P-14806)	615.110	r	(E-12944)
600.510	r	(E-13115) (P-14831)	615.120	r	(E-12944)
	n	(E-12918) (P-14806)	615.130	r	(E-12944)
600.600	r	(E-13115) (P-14831)	615.140	r	(E-12944)
600.610	r	(E-13115) (P-14831)	615.150	r	(E-12944)
600.700	r	(E-13115) (P-14831)	615.160	r	(E-12944)
600.710	r	(E-13115) (P-14831)	615.200	r	(E-12944)
600.720	r	(E-13115) (P-14831)		n	(E-13002)
600.740	r	(E-13115) (P-14831)	615.210	n	(E-13002)
600.800	r	(E-13115) (P-14831)	615.220	n	(E-13002)
600.810	r	(E-13115) (P-14831)	615.230	n	(E-13002)
600.820	r	(E-13115) (P-14831)	615.300	n	(E-13002)
600.830	r	(E-13115) (P-14831)	615.310	r	(E-12944)
600.900	r	(E-13115) (P-14831)		n	(E-13002)
600.910	r	(E-13115) (P-14831)	615.320	r	(E-12944)
600.920	r	(E-13115) (P-14831)		n	(E-13002)
600.930	r	(E-13115) (P-14831)	615.330	r	(E-12944)
600.1000	r	(E-13115) (P-14831)		n	(E-13002)
600.1010	r	(E-13115) (P-14831)	615.340	n	(E-12944)
600.1020	r	(E-13115) (P-14831)		n	(E-13002)
600.1030	r	(E-13115) (P-14831)	615.350	r	(E-12944)
600.1100	r	(E-13115) (P-14831)	615.360	r	(E-12944)
600.1110	r	(E-13115) (P-14831)	615.370	r	(E-12944)
600.1120	r	(E-13115) (P-14831)	615.380	r	(E-12944)
600.1130	r	(E-13115) (P-14831)	615.390	r	(E-12944)
600.1140	r	(E-13115) (P-14831)		r	

TITLE 77 (CONT'D)					
395.175	n	(P-8066/92; A-2984)	535.810	am	(P-10911/92; A-8196)
395.180	am	(P-8066/92; A-2984)	535.1000	n	(P-10911/92; A-8196)
395.190	am	(P-8066/92; A-2984)	540.65	am	(P-15023/92; A-8258)
395.200	r	(P-8066/92; A-2984)	540.70	am	(P-15023/92; A-8258)
395.300	am	(P-8066/92; A-2984)	540.80	am	(P-15023/92; A-8258)
395.400	am	(P-8066/92; A-2984)	540.90	am	(P-15023/92; A-8258)
505.10	n	(P-13406) (E-13631)	540.220	n	(P-12101) (E-12439)
505.20	n	(P-13406) (E-13631)	593.10	n	(P-11352)
505.30	n	(P-13406) (E-13631)	593.20	n	(P-11352)
505.40	n	(P-13406) (E-13631)	593.30	n	(P-11352)
505.50	n	(P-13406) (E-13631)	593.110	n	(P-11352)
505. Ap. A	n	(P-13406) (E-13631)	593.120	n	(P-11352)
535.10	am	(P-10911/92; A-8196)	593.130	n	(P-11352)
535.20	am	(P-10911/92; A-8196)	593.140	n	(P-11352)
535.100	am	(P-10911/92; A-8196)	593.200	n	(P-11352)
535.150	am	(P-10911/92; A-8196)	593.210	n	(P-11352)
535.200	am	(P-10911/92; A-8196)	593.220	n	(P-11352)
535.210	am	(P-10911/92; A-8196)	593.230	n	(P-11352)
535.215	am	(P-10911/92; A-8196)	593.240	n	(P-11352)
535.216	n	(P-10911/92; A-8196)	595.10	am	(P-17447/92; A-13746)
535.220	r	(P-10911/92; A-8196)	595.100	am	(P-17447/92; A-13746)
535.230	am	(P-10911/92; A-8196)	595.110	am	(P-17447/92; A-13746)
535.260	am	(P-10911/92; A-8196)	595.200	am	(P-17447/92; A-13746)
535.265	am	(P-10911/92; A-8196)	595.300	am	(P-17447/92; A-13746)
535.270	am	(P-10911/92; A-8196)	595.310	am	(P-17447/92; A-13746)
535.310	am	(P-10911/92; A-8196)	595.320	am	(P-17447/92; A-13746)
535.315	am	(P-10911/92; A-8196)	595. Ap. A	r	(P-17447/92; A-13746)
535.320	am	(P-10911/92; A-8196)	595. Ap. B	r	(P-17447/92; A-13746)
535.330	am	(P-10911/92; A-8196)	597.10	n	(P-17529/92; A-13763)
535.340	am	(P-10911/92; A-8196)	597.100	n	(P-17529/92; A-13763)
535.350	am	(P-10911/92; A-8196)	597.110	n	(P-17529/92; A-13763)
535.400	am	(P-10911/92; A-8196)	597.200	n	(P-17529/92; A-13763)
535.410	am	(P-10911/92; A-8196)	597.210	n	(P-17529/92; A-13763)
535.415	am	(P-10911/92; A-8196)	597.220	n	(P-17529/92; A-13763)
535.420	am	(P-10911/92; A-8196)	597.300	n	(P-17529/92; A-13763)
535.430	am	(P-10911/92; A-8196)	597.310	n	(P-17529/92; A-13763)
535.435	am	(P-10911/92; A-8196)	597.320	n	(P-17529/92; A-13763)
535.440	am	(P-10911/92; A-8196)	600.100	n	(P-14806)
535.500	am	(P-10911/92; A-8196)	600.110	r	(P-14831)
535.510	am	(P-10911/92; A-8196)	600.120	n	(E-13115) (P-14831)
535.515	am	(P-10911/92; A-8196)	600.130	r	(E-13115) (P-14831)
535.520	am	(P-10911/92; A-8196)	600.140	r	(E-13115) (P-14831)
535.530	am	(P-10911/92; A-8196)	600.200	r	(E-13115) (P-14831)
535.535	am	(P-10911/92; A-8196)		r	(E-12918) (P-14806)
535.540	am	(P-10911/92; A-8196)		r	
535.600	am	(P-10911/92; A-8196)		r	
535.650				n	
535.750	am	(P-10911/92; A-8196)			

ILLINOIS REGISTER
Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 77 (CONT'D)			TITLE 77 (CONT'D)		
790.974	am	(P-17496/92; W-7075)	790.2340	r	(P-7198) (E-7283)
790.980	r	(P-7198) (E-7283)	790.2340	r	(P-7198) (E-7283)
790.1020	r	(P-7198) (E-7283)	790.2390	r	(P-7198) (E-7283)
790.1060	r	(P-7198) (E-7283)	790.2420	r	(P-7198) (E-7283)
790.1100	r	(P-7198) (E-7283)	790.2460	r	(P-7198) (E-7283)
790.1107	r	(P-7198) (E-7283)	790.2462	am	(P-17496/92; W-7075)
790.1112	r	(P-7198) (E-7283)	790.2465	am	(P-7198) (E-7283)
790.1120	r	(P-7198) (E-7283)	790.2470	r	(P-7198) (E-7283)
790.1125	r	(P-7198) (E-7283)	790.2485	r	(P-7198) (E-7283)
790.1127	r	(P-7198) (E-7283)	790.2500	r	(P-7198) (E-7283)
790.1129	r	(P-7198) (E-7283)	790.2510	r	(P-7198) (E-7283)
790.1131	r	(P-7198) (E-7283)	790.2540	r	(P-7198) (E-7283)
790.1140	r	(P-7198) (E-7283)	790.2555	r	(P-7198) (E-7283)
790.1180	r	(P-7198) (E-7283)	790.2580	r	(P-7198) (E-7283)
790.1200	r	(P-7198) (E-7283)	790.2583	r	(P-7198) (E-7283)
790.1220	r	(P-7198) (E-7283)	790.2585	r	(P-7198) (E-7283)
790.1260	r	(P-7198) (E-7283)	790.2587	n	(P-17496/92; W-7075)
790.1300	r	(P-7198) (E-7283)	790.2600	n	(P-17496/92; W-7075)
790.1345	r	(P-7198) (E-7283)	790.2603	r	(P-7198) (E-7283)
790.1350	am	(P-17496/92; W-7075)	790.2605	am	(P-7198) (E-7283)
790.1360	r	(P-7198) (E-7283)	790.2613	am	(P-7198) (E-7283)
790.1380	r	(P-7198) (E-7283)	790.2614	r	(P-7198) (E-7283)
790.1386	r	(P-7198) (E-7283)	790.2617	r	(P-7198) (E-7283)
790.1388	am	(P-17496/92; W-7075)	790.2618	am	(P-17496/92; W-7075)
790.1390	am	(P-7198) (E-7283)	790.2620	r	(P-7198) (E-7283)
790.1418	am	(P-17496/92; W-7075)	790.2645	r	(P-7198) (E-7283)
790.1420	r	(P-7198) (E-7283)	790.2655	r	(P-7198) (E-7283)
790.1423	r	(P-7198) (E-7283)	790.2660	r	(P-7198) (E-7283)
790.1425	r	(P-7198) (E-7283)	790.2661	am	(P-17496/92; W-7075)
790.1440	r	(P-7198) (E-7283)	790.2662	am	(P-7198) (E-7283)
790.1460	r	(P-7198) (E-7283)	790.2663	r	(P-7198) (E-7283)
790.1490	r	(P-7198) (E-7283)	790.2668	r	(P-7198) (E-7283)
790.1500	r	(P-7198) (E-7283)	790.2672	r	(P-7198) (E-7283)
790.1540	r	(P-7198) (E-7283)	790.2700	r	(P-7198) (E-7283)
790.1560	am	(P-17496/92; W-7075)	790.2740	r	(P-7198) (E-7283)
790.1565	r	(P-7198) (E-7283)	790.2780	r	(P-7198) (E-7283)
790.1570	n	(P-17496/92; W-7075)	790.2800	r	(P-7198) (E-7283)
790.1573	r	(P-7198) (E-7283)	790.2805	r	(P-7198) (E-7283)
790.1577	am	(P-17496/92; W-7075)	790.2820	r	(P-7198) (E-7283)
790.1580	r	(P-7198) (E-7283)	790.2860	r	(P-7198) (E-7283)

ILLINOIS REGISTER
Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

790.1620	r	(P-7198) (E-7283)	790.2900	r	(P-7198) (E-7283)
790.1660	r	(P-7198) (E-7283)	790.2902	r	(P-7198) (E-7283)
790.1685	r	(P-7198) (E-7283)	790.2904	r	(P-7198) (E-7283)
790.1686	r	(P-7198) (E-7283)	790.2908	r	(P-7198) (E-7283)
790.1697	r	(P-7198) (E-7283)	790.2915	r	(P-7198) (E-7283)
790.1700	r	(P-7198) (E-7283)	790.2928	am	(P-17496/92; W-7075)
790.1706	r	(P-7198) (E-7283)	790.2932	am	(P-17496/92; W-7075)
790.1708	r	(P-7198) (E-7283)	790.2940	r	(P-7198) (E-7283)
790.1710	r	(P-7198) (E-7283)	790.2980	r	(P-7198) (E-7283)
790.1719	r	(P-7198) (E-7283)	790.3020	r	(P-7198) (E-7283)
790.1721	r	(P-7198) (E-7283)	790.3021	r	(P-7198) (E-7283)
790.1740	r	(P-7198) (E-7283)	790.3023	r	(P-7198) (E-7283)
790.1780	r	(P-7198) (E-7283)	790.3025	r	(P-7198) (E-7283)
790.1820	r	(P-7198) (E-7283)	790.3027	am	(P-17496/92; W-7075)
790.1835	r	(P-7198) (E-7283)	790.3028	r	(P-7198) (E-7283)
790.1842	r	(P-7198) (E-7283)	790.3029	r	(P-7198) (E-7283)
790.1846	r	(P-7198) (E-7283)	790.3030	r	(P-7198) (E-7283)
790.1848	r	(P-7198) (E-7283)	790.3032	r	(P-7198) (E-7283)
790.1856	r	(P-7198) (E-7283)	790.3033	r	(P-7198) (E-7283)
790.1858	r	(P-7198) (E-7283)	790.3038	r	(P-7198) (E-7283)
790.1859	n	(P-17496/92; W-7075)	790.3042	r	(P-7198) (E-7283)
790.1860	r	(P-7198) (E-7283)	790.3048	r	(P-7198) (E-7283)
790.1870	r	(P-7198) (E-7283)	790.3049	r	(P-7198) (E-7283)
790.1900	r	(P-7198) (E-7283)	790.3051	r	(P-7198) (E-7283)
790.1930	am	(P-17496/92; W-7075)	790.3054	r	(P-7198) (E-7283)
790.1940	r	(P-7198) (E-7283)	790.3056	r	(P-7198) (E-7283)
790.1950	am	(P-17496/92; W-7075)	790.3060	r	(P-7198) (E-7283)
790.1960	am	(P-17496/92; W-7075)	790.3085	r	(P-7198) (E-7283)
790.1980	r	(P-7198) (E-7283)	790.3100	r	(P-7198) (E-7283)
790.2020	r	(P-7198) (E-7283)	790.3140	r	(P-7198) (E-7283)
790.2060	r	(P-7198) (E-7283)	790.3180	r	(P-7198) (E-7283)
790.2084	r	(P-7198) (E-7283)	790.3220	r	(P-7198) (E-7283)
790.2086	n	(P-17496/92; W-7075)	790.3235	n	(P-17496/92; W-7075)
790.2092	r	(P-7198) (E-7283)	790.3260	r	(P-7198) (E-7283)
790.2097	r	(P-7198) (E-7283)	790.3300	r	(P-7198) (E-7283)
790.2100	r	(P-7198) (E-7283)	790.3308	am	(P-17496/92; W-7075)
790.2130	r	(P-7198) (E-7283)	790.3315	r	(P-7198) (E-7283)
790.2140	r	(P-7198) (E-7283)	790.3335	r	(P-7198) (E-7283)
790.2155	r	(P-7198) (E-7283)	790.3337	n	(P-17496/92; W-7075)
790.2180	r	(P-7198) (E-7283)	790.3340	r	(P-7198) (E-7283)
790.2180	r	(P-7198) (E-7283)	790.3350	r	(P-7198) (E-7283)
790.2220	r	(P-17496/92; W-7075)	790.3380	r	(P-7198) (E-7283)
790.2260	r	(P-7198) (E-7283)	790.3420	am	(P-17496/92; W-7075)
790.2300	r	(P-7198) (E-7283)		r	(P-7198) (E-7283)

TITLE 77 (CONT'D)	790.6580	am	(P-17496/92; W-7075)	790.7280	am	(P-17496/92; W-7075)
		r	(P-7198) (E-7283)		r	(P-7198) (E-7283)
	790.6610	am	(P-17496/92; W-7075)	790.7284	r	(P-7198) (E-7283)
		r	(P-7198) (E-7283)	790.7288	r	(P-7198) (E-7283)
	790.6620	r	(P-7198) (E-7283)	790.7291	r	(P-7198) (E-7283)
	790.6621	r	(P-7198) (E-7283)	790.7294	r	(P-7198) (E-7283)
	790.6660	r	(P-7198) (E-7283)	790.7296	r	(P-7198) (E-7283)
	790.6670	r	(P-7198) (E-7283)	790.7300	r	(P-7198) (E-7283)
	790.6700	r	(P-7198) (E-7283)	790.7340	r	(P-7198) (E-7283)
	790.6740	am	(P-17496/92; W-7075)	790.7380	r	(P-7198) (E-7283)
	790.6740	r	(P-7198) (E-7283)	790.7400	r	(P-7198) (E-7283)
	790.6780	r	(P-7198) (E-7283)	790.7420	r	(P-7198) (E-7283)
	790.6800	r	(P-7198) (E-7283)	790.7460	r	(P-7198) (E-7283)
	790.6820	r	(P-7198) (E-7283)	790.7500	r	(P-7198) (E-7283)
	790.6860	r	(P-7198) (E-7283)	790.7510	r	(P-7198) (E-7283)
	790.6875	r	(P-7198) (E-7283)	790.7520	n	(P-17496/92; W-7075)
	790.6885	r	(P-7198) (E-7283)	790.7540	r	(P-7198) (E-7283)
	790.6895	r	(P-7198) (E-7283)	790.7580	r	(P-7198) (E-7283)
	790.6900	r	(P-7198) (E-7283)	790.7620	r	(P-7198) (E-7283)
	790.6940	r	(P-7198) (E-7283)	790.7660	r	(P-7198) (E-7283)
	790.6946	r	(P-7198) (E-7283)	790.7700	r	(P-7198) (E-7283)
	790.6960	r	(P-7198) (E-7283)	790.7740	r	(P-7198) (E-7283)
	790.6980	r	(P-7198) (E-7283)	790.7780	r	(P-7198) (E-7283)
	790.7020	r	(P-7198) (E-7283)	790.7820	r	(P-7198) (E-7283)
	790.7060	r	(P-7198) (E-7283)	790.7828	r	(P-7198) (E-7283)
	790.7100	r	(P-7198) (E-7283)	790.7834	r	(P-7198) (E-7283)
	790.7120	r	(P-7198) (E-7283)	790.7860	r	(P-7198) (E-7283)
	790.7130	r	(P-7198) (E-7283)	790.7875	n	(P-17496/92; W-7075)
	790.7140	r	(P-7198) (E-7283)	790.7900	r	(P-7198) (E-7283)
	790.7160	r	(P-7198) (E-7283)	790.7940	r	(P-7198) (E-7283)
	790.7180	r	(P-7198) (E-7283)	790.7980	r	(P-7198) (E-7283)
	790.7181	r	(P-7198) (E-7283)	790.8015	r	(P-7198) (E-7283)
	790.7200	r	(P-7198) (E-7283)	790.8020	r	(P-7198) (E-7283)
	790.7220	am	(P-7198) (E-7283)	790.8030	am	(P-17496/92; W-7075)
	790.7221	r	(P-7198) (E-7283)	790.8060	r	(P-7198) (E-7283)
	790.7223	r	(P-7198) (E-7283)	790.8100	r	(P-7198) (E-7283)
	790.7229	r	(P-7198) (E-7283)	790.8106	r	(P-7198) (E-7283)
	790.7245	am	(P-17496/92; W-7075)	790.8136	r	(P-7198) (E-7283)
		r	(P-7198) (E-7283)	790.8140	r	(P-7198) (E-7283)
	790.7260	r	(P-7198) (E-7283)	790.8180	r	(P-7198) (E-7283)
	790.7263	am	(P-17496/92; W-7075)	790.8220	r	(P-7198) (E-7283)
	790.7265	am	(P-17496/92; W-7075)	790.8232	r	(P-7198) (E-7283)
		r	(P-7198) (E-7283)	790.8244	am	(P-7198) (E-7283)
	790.7272	r	(P-7198) (E-7283)	790.8248	am	(P-17496/92; W-7075)
	790.7278	am	(P-17496/92; W-7075)	790.8260	r	(P-7198) (E-7283)
		r	(P-7198) (E-7283)	790.8290	r	(P-7198) (E-7283)
				790.8300	r	(P-7198) (E-7283)

[illegible]

ILLINOIS REGISTER
Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 77 (CONT'D)				
1235.210	n	(E-432; O-3056) (P-683; A-8498)	2090.35 (P-8599) am	
1235.220	n	(E-432; O-3056) (P-683; A-8498)	2090.40 (P-8599) am	
1235.230	n	(E-432; O-3056) (P-683; A-8498)	2090.41 (P-8599) am	
1235.240	n	(E-432; O-3056) (P-683; A-8498)	2090.42 (P-8599) am	
1235.250	n	(E-432; O-3056) (P-683; A-8498)	2090.43 (P-8599) am	
1235.300	n	(E-432; O-3056) (P-683; A-8498)	2090.70 (P-8599) am	
1235.310	n	(E-432; O-3056) (P-683; A-8498)	2090.90 (P-8599) am	
1235.320	N	(A-8498)	2090.100 (P-8599) am	
1240.10	r	(P-5225/92; A-5880)	2510.50 (E-14112) am	
1240.20	r	(P-5225/92; A-5880)	2510.55 (P-18913/92; A-9700) am	
1240.30	r	(P-5225/92; A-5880)	2510.60 (E-14112) am	
1240.40	r	(P-5225/92; A-5880)	2510.70 (P-1695; A-9896) am	
1240.50	r	(P-5225/92; A-5880)	2510.90 (E-2031) n	
1240.60	r	(P-5225/92; A-5880)	2510.90 (P-1695; A-9896) n	
1240.70	r	(P-5225/92; A-5880)	2510.90 (E-2031) n	
1240.Ap.A	r	(P-5225/92; A-5880)	2510.90 (E-14112) n	
2080.10	am	(P-11367/92; A-11424)	2530.Ap.B (E-14172) am	
2080.20	am	(P-11367/92; A-11424)	2540.30 (P-18915/92; A-9713) am	
2080.30	am	(P-11367/92; A-11424)	3000.200 (P-13463/92; A-8817) am	
2080.40	am	(P-11367/92; A-11424)	3000.210 (P-13463/92; A-8817) am	
2080.50	am	(P-11367/92; A-11424)	3000.230 (P-13463/92; A-8817) am	
2080.60	am	(P-11367/92; A-11424)	3000.Ap.A (P-13463/92; A-8817) r	
2080.70	am	(P-11367/92; A-11424)	3000.Ap.B (P-13463/92; A-8817) r	
2080.80	am	(P-11367/92; A-11424)	TITLE 80	
2080.90	am	(P-11367/92; A-11424)	150.210	am
2080.100	am	(P-11367/92; A-11424)	(E-17372/92; RC-181; F-5952 (P-17959/92; P-9716; RQ-11895; EC-14684) (P-17959/92; A-9716; RQ-1	

ILLINOIS REGISTER		
Volume 17	Issue #39	SECTIONS AFFECTED INDEX
September 24, 1993		

TITLE 77 (CONT'D)			
845.H.A	n	(P-123.14/92; A-1884)	1130.220 am (P-4755/92; A-5882)
845.Ap.E	n	(P-123.14/92; A-1884)	1130.410 am (P-4755/92; A-5882)
890.	n	(P-184.79/92; O-14187)	1130.510 am (P-4755/92; A-5882)
900.10	am	(P-108.70/92; A-4388)	1130.620 am (P-4755/92; A-5882)
900.30	am	(P-108.70/92; A-4388)	1130.630 am (P-4755/92; A-5882)
900.40	am	(P-108.70/92; A-4388)	1130.640 am (P-4755/92; A-5882)
900.50	am	(P-108.70/92; A-4388)	1130.710 am (P-4755/92; A-5882)
900.60	am	(P-108.70/92; A-4388)	1130.720 am (P-4755/92; A-5882)
900.65	am	(P-108.70/92; A-4388)	1130.730 am (P-4755/92; A-5882)
900.70	am	(P-108.70/92; A-4388)	1130.740 am (P-4755/92; A-5882)
900.Th.E	n	(P-108.70/92; A-4388)	1130.750 am (P-15321/92; A-4448)
900.Th.F	n	(P-108.70/92; A-4388)	1130.760 am (P-4755/92; A-5882)
900.Th.G	n	(P-108.70/92; A-4388)	1130.770 am (P-4755/92; A-5882)
900.Th.H	n	(P-108.70/92; A-4388)	1130.780 am (P-4755/92; A-5882)
900.Th.I	n	(P-108.70/92; A-4388)	1130.Ap.A (P-4755/92; O-1242; R-5951; A-5882)
Ex.A	n	(P-108.70/92; A-4388)	1230.10 r (P-5187/92; A-5878)
Ex.B	n	(P-108.70/92; A-4388)	1230.20 r (P-5187/92; A-5878)
Ex.C	n	(P-108.70/92; A-4388)	1230.30 r (P-5187/92; A-5878)
Ex.D	n	(P-108.70/92; A-4388)	1230.110 r (P-5187/92; A-5878)
915.10	am	(P-109.89/92; A-4425)	1230.120 r (P-5187/92; A-5878)
915.20	am	(P-109.89/92; A-4425)	1230.210 r (P-5187/92; A-5878)
915.40	n	(P-109.89/92; A-4425)	1230.220 r (P-5187/92; A-5878)
915.50	n	(P-109.89/92; A-4425)	1230.230 r (P-5187/92; A-5878)
1100.670	am	(P-126.06)	1230.240 r (P-5187/92; A-5878)
1100.740	n	(P-81.44)	1230.250 r (P-5187/92; A-5878)
1110.60	n	(P-15328/92; A-4453)	1230.260 r (P-5187/92; A-5878)
1110.235	n	(P-15328/92; A-4453)	1230.310 r (P-5187/92; A-5878)
1110.1810	am	(P-12593)	1230.320 r (P-5187/92; A-5878)
1110.1830	am	(P-12593)	1230.410 r (P-5187/92; A-5878)
1110.2510	n	(P-81.49)	1230.420 r (P-5187/92; A-5878)
1110.2520	n	(P-81.49)	1230.Th.A (P-5187/92; A-5878)
1110.2530	n	(P-81.49)	1230.Th.B (P-5187/92; A-5878)
1110.2540	n	(P-81.49)	1235.10 n (E-432; O-3056) (P-683; A-8498)
1110.2550	n	(P-81.49)	1235.20 n (E-432; O-3056) (P-683; A-8498)
1120.10	n	(P-5205/92; A-4431)	1235.30 n (E-432; O-3056) (P-683; A-8498)
1120.20	n	(P-5205/92; RC-1244; A-4431)	1235.40 n (E-432; O-3056) (P-683; A-8498)
1120.110	n	(P-5205/92; A-4431)	1235.50 n (E-432; O-3056) (P-683; A-8498)
1120.120	n	(P-5205/92; A-4431)	1235.100 n (E-432; O-3056) (P-683; A-8498)
1120.130	n	(P-5205/92; A-4431)	1235.110 n (E-432; O-3056) (P-683; A-8498)
1120.210	n	(P-5205/92; A-4431)	1235.200 n (E-432; O-3056) (P-683; A-8498)
1120.310	n	(P-5205/92; RC-1244; A-4431)	1235.110 n (E-432; O-3056) (P-683; A-8498)
1120.Ap.A	n	(P-5205/92; RC-1244; A-4431)	1235.200 n (E-432; O-3056) (P-683; A-8498)
1130.140	am	(P-4755/92; A-5882)	1235.200 n (E-432; O-3056) (P-683; A-8498)

ILLINOIS REGISTER

Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 80 (CONT'D)		310. Ap.D	(P-14001/92; A-1819)
302.610 am	(P-17187/92; A-3169)	am	(P-14314) (E-14666)
302.825 am	(P-147788)	n	(P-14314) (E-14666)
302.840 am	(P-147788)	am	(P-15342/92; A-1652)
303.112 n	(P-19285/92; A-5587)	am	(P-13827)
310.30 am	(P-18139/92; A-6441)	am	(P-11724/92; W-869)
310.40 am	(P-18139/92; A-6441)	am	(P-12409/92; W-869)
310.110 am	(P-13679/92; A-238)		(P-91; W-869)
	(P-12481) (E-12900)		(P-15347/92; A-4510)
310.130 am	(P-13679/92; A-238)		(P-6632)
	(P-12481) (E-12900)	n	(P-6635)
310.210 am	(P-7605)	n	(P-6635)
310.230 am	(P-18139/92; A-6441)	n	(P-6635)
310.270 am	(P-18139/92; A-6441)	n	(P-6635)
310.290 am	(P-191; C-672; A-13409)	n	(P-6635)
	(P-14001/92; A-1819)	n	(P-6635)
	(P-14314) (E-14666)	n	(P-6635)
310.320 am	(P-7605)	n	(P-6635)
310.450 am	(P-14001/92; A-1819)	n	(P-6635)
	(P-14314) (E-14666)	n	(P-6635)
310.455 am	(P-14001/92; A-1819)	n	(P-6635)
310.470 am	(P-14314) (E-14666)	n	(P-6635)
310.495 n	(P-13679/92; A-238)	am	(P-3703; A-15588)
310.530 am	(P-14314) (E-14666)	am	(P-3703; A-15588)
	(P-14001/92; A-1819)	r	(P-3703; A-15588)
310.540 am	(P-14314) (E-14666)	n	(P-3703; A-15588)
310. Ap.A am	(PP-498) (P-13179/92; A-590) (P-18139/92; A-6441) (P-7605)	am	(P-3703; A-15588)
.Tb.C am	(P-18139/92; A-6441)	am	(P-3703; A-15588)
.Tb.D am	(P-18139/92; A-6441)	am	(P-3703; A-15588)
.Tb.E am	(P-18139/92; A-6441)	am	(P-3703; A-15588)
.Tb.F am	(P-18139/92; A-6441)	am	(P-3703; A-15588)
.Tb.G am	(P-7605)	am	(P-3703; A-15588)
.Tb.M n	(P-13179/92; A-590)	am	(P-3703; A-15588)
.Tb.N am	(PP-498)	am	(P-3703; A-15588)
.Tb.O am	(P-18139/92; A-6441)	am	(P-3703; A-15588)
.Tb.P am	(P-18139/92; A-6441)	am	(P-3703; A-15588)
.Tb.Q am	(P-7605)	am	(P-3703; A-15588)
.Tb.U am	(P-18139/92; A-6441)	am	(P-3703; A-15588)
310. Ap.B am	(P-13679/92; A-238)	am	(P-3703; A-15588)
	(P-12481) (E-12900)	am	(P-3703; A-15588)
310. Ap.C am	(P-191; C-672; A-13409)	am	(P-3703; A-15588)
	(P-14001/92; A-1819)	am	(P-3703; A-15588)
	(P-14314) (E-14666)	am	(P-3703; A-15588)

SAL-59

ILLINOIS REGISTER

Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 80 (CONT'D)		310. Ap.D	(P-14001/92; A-1819)
1220.70 am	(P-3755; A-15628)	am	(P-14314) (E-14666)
1220.80 n	(P-3755; A-15628)	n	(P-14314) (E-14666)
1220.90 n	(P-3755; A-15628)	n	(P-15342/92; A-1652)
1220.100 n	(P-3755; A-15628)	n	(P-13827)
1230.10 am	(P-3718; A-15599)	am	(P-11724/92; W-869)
1230.80 am	(P-3718; A-15599)	am	(P-12409/92; W-869)
1230.90 am	(P-3718; A-15599)	am	(P-91; W-869)
1230.150 am	(P-3718; A-15599)	am	(P-15347/92; A-4510)
1230.160 am	(P-3718; A-15599)	am	(P-6632)
1230.180 am	(P-3718; A-15599)	am	(P-6635)
1230.190 am	(P-3718; A-15599)	am	(P-6635)
1230.220 am	(P-3718; A-15599)	am	(P-6635)
1650.210 am	(P-12384/92; A-1631)	am	(P-6635)
1650.230 am	(P-12384/92; A-1631)	am	(P-6635)
1650.240 am	(P-12384/92; A-1631)	am	(P-6635)
1650.290 am	(P-12384/92; A-1631)	am	(P-6635)
1650.330 am	(P-12384/92; A-1631)	am	(P-6635)
1650.340 am	(P-12384/92; A-1631)	am	(P-6635)
1650.370 am	(P-12384/92; A-1631)	am	(P-6635)
1650.410 am	(P-12384/92; A-1631)	am	(P-6635)
1650.450 am	(P-12384/92; A-1631)	am	(P-6635)
1650.460 am	(P-12384/92; A-1631)	am	(P-6635)
1650.510 am	(P-12384/92; A-1631)	am	(P-6635)
1650.520 am	(P-12384/92; A-1631)	am	(P-6635)
1650.570 am	(P-12384/92; A-1631)	am	(P-6635)
1650.620 am	(P-12384/92; A-1631)	am	(P-6635)
1650.630 am	(P-12384/92; A-1631)	am	(P-6635)
1650.640 am	(P-12384/92; A-1631)	am	(P-6635)
1650.650 am	(P-12384/92; A-1631)	am	(P-6635)
2160.120 am	(P-3577; A-11441)	am	(P-3703; A-15588)
2160.130 am	(P-3577; A-11441)	am	(P-3703; A-15588)
2160.210 am	(P-3577; A-11441)	am	(P-3703; A-15588)
2160.220 am	(P-3577; A-11441)	am	(P-3703; A-15588)
2160.250 am	(P-3577; A-11441)	am	(P-3703; A-15588)
2160.310 am	(P-3577; A-11441)	am	(P-3703; A-15588)
2160.320 am	(P-3577; A-11441)	am	(P-3703; A-15588)
2160.325 am	(P-3577; A-11441)	am	(P-3703; A-15588)
2160.330 am	(P-3577; A-11441)	am	(P-3703; A-15588)
2160.410 am	(P-3577; A-11441)	am	(P-3703; A-15588)
2160.510 am	(P-3577; A-11441)	am	(P-3703; A-15588)
2160.610 am	(P-3577; A-11441)	am	(P-3703; A-15588)
2160.620 am	(P-3577; A-11441)	am	(P-3703; A-15588)
2650.1 am	(P-3449)	am	(P-3703; A-15588)
2650.10 am	(P-2449)	am	(P-3703; A-15588)
2650.15 am	(P-2449)	am	(P-3703; A-15588)
2650.25 am	(P-2449)	am	(P-3703; A-15588)
2650.30 am	(P-2449)	am	(P-3703; A-15588)

SAL-60

ILLINOIS REGISTER
Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 83 (CONT'D)			TITLE 86 (CONT'D)		
755.Ex.J n	(P-16709/92; A-5594)	100.3010 re	(A-14189)	100.7000 re	(A-14189)
755.Ex.J n	(P-16709/92; A-5594)	100.3020 re	(A-14189)	100.7010 am	(P-222; A-8869)
755.Ex.K n	(P-16709/92; A-5594)	100.3100 am	(E-473)		(E-473)
755.Ex.L n	(P-16709/92; A-5594)				
755.Ex.M n	(P-16709/92; A-5594)				
755.Ex.N n	(P-16709/92; A-5594)				
756.10 am	(P-15605/92; A-12294)	100.3110 re	(A-14189)	100.7020 re	(A-14189)
756.15 am	(P-15605/92; A-12294)	100.3120 re	(A-14189)	100.7030 re	(A-14189)
756.20 am	(P-15605/92; A-12294)	100.3200 re	(A-14189)	100.7040 re	(A-14189)
756.30 n	(P-15605/92; A-12294)	100.3210 re	(A-14189)	100.7050 re	(A-14189)
756.100 am	(P-15605/92; A-12294)	100.3220 re	(A-14189)	100.7060 re	(A-14189)
756.110 am	(P-15605/92; A-12294)	100.3300 re	(A-14189)	100.7070 re	(A-14189)
756.115 am	(P-15605/92; A-12294)	100.3310 re	(A-14189)	100.7080 re	(A-14189)
756.116 n	(P-15605/92; A-12294)	100.3320 re	(A-14189)	100.7090 re	(A-14189)
756.120 am	(P-15605/92; A-12294)	100.3330 re	(A-14189)	100.7095 re	(A-14189)
756.125 am	(P-15605/92; A-12294)	100.3340 re	(A-14189)		
756.200 am	(P-15605/92; A-12294)	100.3350 re	(A-14189)	100.7100 re	(P-15471)
756.205 am	(P-15605/92; A-12294)	100.3360 re	(A-14189)	100.7120 re	(A-14189)
756.210 am	(P-15605/92; A-12294)	100.3370 re	(A-14189)	100.7200 re	(A-14189)
	(P-14004/92; A-1848)	100.3380 re	(P-222; A-8869)	100.7300 re	(A-14189)
	(P-15605/92; A-12294)	100.3400 am	(E-473)	100.7310 re	(A-14189)
	(P-15605/92; A-12294)		(P-6619; A-13776)		
	(P-15605/92; A-12294)	100.3700 am	(P-9870)	100.7320 re	(A-14189)
	(P-15605/92; A-12294)		(P-9870)	100.7330 re	(A-14189)
	(P-15605/92; A-12294)	100.3750 n	(A-14189)	100.7340 re	(A-14189)
	(P-11988)	100.5000 re	(A-14189)	100.9000 re	(A-14189)
	(P-11988)	100.5010 re	(A-14189)		
	(P-11988)	100.5020 re	(P-15471)	100.9005 am	(P-15471)
	(P-11988)		(A-14189)	100.9010 re	(A-14189)
	(P-11988)	100.5030 re	(A-14189)	100.9100 re	(A-14189)
	(P-11988)	100.5100 re	(A-14189)		
	(P-11988)	100.5110 re	(A-14189)	100.9200 re	(A-14189)
	(P-11988)	100.5120 re	(A-14189)	100.9210 re	(A-14189)
	(P-11988)	100.5130 re	(A-14189)	100.9300 re	(A-14189)
	(P-11988)	100.5140 re	(A-14189)	100.9310 re	(A-14189)
	(P-11988)		(P-15471)	100.9320 re	(A-14189)
	(P-11988)	100.5150 re	(A-14189)	100.9330 re	(A-14189)
	(P-11988)	100.5160 re	(A-14189)	100.9400 re	(A-14189)
	(P-11988)	100.5170 re	(A-14189)		
	(P-11988)	100.5200 re	(A-14189)	100.9410 re	(A-14189)
	(P-11988)	100.5210 re	(A-14189)	100.9420 re	(A-14189)
	(P-11988)	100.5220 re	(A-14189)		
	(P-11988)	100.5230 re	(A-14189)	100.9500 re	(A-14189)
	(P-11988)		(P-15471)	100.9510 re	(A-14189)
	(P-11988)	100.5240 re	(A-14189)	100.9520 re	(A-14189)
	(P-11988)	100.5250 re	(A-14189)	100.9600 re	(A-14189)
	(P-11988)		(P-15471)	100.9700 re	(A-14189)
	(P-11988)	100.5260 re	(A-14189)	100.9800 re	(A-14189)
	(P-11988)	100.5270 re	(A-14189)	100.Ap.A re	(A-14189)
	(P-11988)	100.5280 re	(A-14189)	Tb.A re	(A-14189)

ILLINOIS REGISTER

Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 86 (CONT'D)

130.905	am	(P-15501)	3000.165	am	(P-19681; A-11510)
130.1001	am	(P-6955)	3000.200	am	(P-19681; A-11510)
130.1801	am	(P-6955)	3000.210	am	(P-19681; A-11510)
140.801	am	(P-15515)	3000.220	am	(P-19681; A-11510)
140.1415	am	(P-15515)	3000.230	am	(P-19681; A-11510)
150.1001	am	(P-15527)	3000.231	n	(P-19681; A-11510)
150.1415	am	(P-15527)	3000.235	am	(P-19681; A-11510)
160.140	am	(P-15527)	3000.240	am	(P-19681; A-11510)
160.165	am	(P-15522)	3000.245	am	(P-19681; A-11510)
210.101	am	(E-665) (P-2718; A-8860)	3000.250	am	(P-19681; A-11510)
210.105	am	(P-2718; A-8860)	3000.281	am	(P-19681; A-11510)
210.110	am	(P-2718; A-8860)	3000.282	am	(P-19681; A-11510)
210.115	am	(P-2718; A-8860)	3000.300	am	(P-19681; A-11510)
210.120	am	(P-2718; A-8860)	3000.300	am	(P-19681; A-11510)
210.125	am	(E-665) (P-2718; A-8860)	3000.320	am	(P-19681; A-11510)
210.126	n	(E-665) (P-2718; A-8860)	3000.400	am	(P-19681; A-11510)
210.130	am	(P-2718; A-8860)	3000.405	am	(P-19681; A-11510)
530.115	am	(P-3104; A-11566)	3000.410	am	(P-19681; A-11510)
530.125	am	(P-3104; A-11566)	3000.415	am	(P-19681; A-11510)
535.101	n	(P-15340/92; A-3042)	3000.425	am	(P-19681; A-11510)
535.105	n	(P-15340/92; A-3042)	3000.430	am	(P-19681; A-11510)
535.110	n	(P-15340/92; A-3042)	3000.435	am	(P-19681; A-11510)
535.115	n	(P-15340/92; A-3042)	3000.440	am	(P-19681; A-11510)
535.120	n	(P-15340/92; A-3042)	3000.445	n	(P-19681; A-11510)
535.125	n	(P-15340/92; A-3042)	3000.600	am	(P-19681; A-11510)
535.130	n	(P-15340/92; A-3042)	3000.620	am	(P-19681; A-11510)
535.135	n	(P-15340/92; A-3042)	3000.635	am	(P-19681; A-11510)
535.140	n	(P-15340/92; A-3042)	3000.730	am	(P-19681; A-11510)
535.145	n	(P-15340/92; A-3042)	3000.800	am	(P-19681; A-11510)
750.100	n	(P-8450)	3000.850	am	(P-19681; A-11510)
750.200	n	(P-8450)	3000.1000	am	(P-19681; A-11510)
750.300	n	(P-8450)	3000.1010	am	(P-19681; A-11510)
750.400	n	(P-8450)	3000.1020	am	(P-19681; A-11510)
750.500	n	(P-8450)	3000.1030	am	(P-19681; A-11510)
750.600	n	(P-8450)	3000.1040	am	(P-19681; A-11510)
750.700	n	(P-8450)	3000.1050	am	(P-19681; A-11510)
750.800	n	(P-8450)	3000.1070	am	(P-19681; A-11510)
750.900	n	(P-8450)	3000.1072	am	(P-19681; A-11510)
1000.100	n	(E-12415)	3000.1100	n	(P-19681; A-11510)
3000.100	am	(P-19681; A-11510)	3000.1105	n	(P-19681; A-11510)
3000.101	n	(P-19681; A-11510)	3000.1110	n	(P-19681; A-11510)
3000.110	am	(P-19681; A-11510)	3000.1115	n	(P-19681; A-11510)
3000.115	am	(P-19681; A-11510)	3000.1120	n	(P-19681; A-11510)
3000.140	am	(P-19681; A-11510)	3000.1125	n	(P-19681; A-11510)
3000.141	n	(P-19681; A-11510)	3000.1126	n	(P-19681; A-11510)
3000.160	am	(P-19681; A-11510)	3000.1130	n	(P-19681; A-11510)
			3000.1135	n	(P-19681; A-11510)

SAI-63

ILLINOIS REGISTER

Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 86 (CONT'D)

3000.1140	n	(P-19681; A-11510)	112.253	am	(P-46)
3000.1145	n	(P-19681; A-11510)	112.254	am	(P-46)
3000.1146	n	(P-19681; A-11510)	112.302	am	(P-10705)
3000.1150	n	(P-19681; A-11510)	112.303	am	(P-10705)
3000.1155	n	(P-19681; A-11510)	112.330	am	(P-15277/92; A-2253)
					(P-10705)
			112.370	n	(P-6026; A-15017)
					(E-6325)
			112.404	am	(P-10705)
			112.406	am	(P-10705)
			113.9	am	(P-13383/92; A-827)
			113.113	am	(P-7755; A-14612)
			113.141	am	(P-7755; A-14612)
			113.154	r	(P-14999/92; A-2263)
			113.155	am	(P-13380)
			113.253	am	(P-702; A-6804)
			113.260	am	(P-702; A-6804)
			113.309	n	(P-17457/92; A-6804)
			113.330	n	(P-14533/92; A-3202)
			113.410	am	(P-14533/92; A-3202)
			113.425	am	(P-17047/92; A-4322)
			113.430	am	(P-17047/92; A-4322)
			113.450	n	(P-17457/92; A-6804)
			114.9	am	(P-13395/92; A-1091)
			114.120	am	(P-15810/92; A-3255)
			114.121	r	(P-15810/92; A-3255)
			114.124	r	(P-15810/92; A-3255)
			114.125	r	(P-15810/92; A-3255)
			114.126	r	(P-15810/92; A-3255)
			114.127	r	(P-15810/92; A-3255)
			114.128	r	(P-15810/92; A-3255)
			114.129	r	(P-15810/92; A-3255)
			114.130	r	(P-15810/92; A-3255)
			114.135	r	(P-15810/92; A-3255)
			114.223	am	(P-19654/92; A-6814)
			114.252	am	(P-18226/92; A-6814)
			114.270	r	(P-15008/92; A-2277)
			114.406	n	(P-17459/92; A-6814)
			114.420	am	(P-15008/92; A-2277)
			114.430	am	(P-15287/92; A-2277)
			114.440	n	(P-14538/92; A-3639)
			116.400	am	(P-13764/92; A-1078)
			116.500	am	(P-13764/92; A-1078)
					(P-12092)
			116.510	am	(P-12092)
			116.520	r	(P-13764/92; A-1078)
			117.15	n	(P-2126; A-8191)
					(E-2368)

SAI-64

ILLINOIS REGISTER
Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 89 (CONT'D)				
118.150	n	(P-10751) (E-11217)	140.95	am
120.61	am	(P-2114; A-10402)	140.420	am
120.70	am	(P-711; A-6827)	140.421	am
120.73	n	(P-711; A-6827)	140.485	am
120.75	n	(P-711; A-6827)	140.488	am
120.318	am	(P-13392)	140.492	am
120.385	r	(P-14544/92; A-1102)		
120.386	am	(P-13392)	140.511	am
121.3	am	(P-13383/92; A-644)	140.525	am
121.23	r	(P-15813/92; A-4333)	140.530	am
121.24	r	(P-15813/92; A-4333)	140.538	am
121.25	r	(P-15813/92; A-4333)		
121.26	r	(P-15813/92; A-4333)	140.539	am
121.27	r	(P-15813/92; A-4333)	140.560	am
121.28	r	(P-15813/92; A-4333)	140.579	am
121.29	r	(P-15813/92; A-4333)		
121.31	am	(P-7165; A-14625)	140.583	am
121.32	am	(P-7165; A-14625)	140.642	am
121.41	am	(P-13383/92; A-644)	140.648	am
121.50	am	(P-7165; A-14625)		
121.58	am	(P-7165; A-14625)	140.700	am
121.59	am	(P-13383/92; A-644)	140.76.K	am
121.63	am	(P-7165; A-14625)	144.5	am
121.76	n	(P-13383/92; A-644)	144.25	am
121.160	n	(P-15813/92; A-4333)	144.50	am
121.162	n	(P-15813/92; A-4333)	144.75	am
121.164	n	(P-15813/92; A-4333)	144.125	am
121.166	n	(P-15813/92; A-4333)	144.150	am
121.170	n	(P-15813/92; A-4333)	144.175	am
121.172	n	(P-15813/92; A-4333)	144.205	am
121.174	n	(P-15813/92; A-4333)	144.230	n
121.176	n	(P-15813/92; A-4333)	144.250	am
121.178	n	(P-15813/92; A-4333)	144.275	am
121.180	n	(P-15813/92; A-4333)	144.300	am
121.182	n	(P-15813/92; A-4333)	144.325	am
	am	(P-14798) (E-15149)	147.5	am
121.184	n	(P-15813/92; A-4333)	147.25	am
121.186	n	(P-15813/92; A-4333)	147.50	am
121.188	n	(P-15813/92; A-4333)	147.100	am
121.190	n	(P-15813/92; A-4333)	147.150	am
140.12	am	(P-17049/92; A-6196)		
140.19	am	(P-62; A-6839)		
140.24	am	(P-7183)	147.205	am
140.80	n	(P-15019/92; A-3421)		
140.82	n	(P-15019/92; A-3421)	147.Tb.A	am
140.84	n	(P-15019/92; A-3421)	147.Tb.B	am
140.94	am	(P-15019/92; A-3421)	147.Tb.C	am

ILLINOIS REGISTER
Volume 17, Issue #39 SECTIONS AFFECTED INDEX September 24, 1993

TITLE 89 (CONT'D)				
147.Tb.D	am	(P-5471; A-13498)	148.260	am
147.Tb.E	am	(P-5471; A-13498)		
147.Tb.F	am	(P-1716; A-8486)	148.270	am
147.Tb.G	r	(P-5471; A-13498)	148.280	am
148.20	am	(P-15291)		
148.25	n	(P-14540/92; A-3296)	148.290	am
	am	(P-15291)		
148.30	am	(P-14540/92; A-3296)	148.310	am
148.40	am	(P-14540/92; A-3296)		
	am	(P-15291)		
148.50	am	(P-14540/92; A-3296)	148.320	am
	am	(P-15291)	149.5	am
148.60	am	(P-14540/92; A-3296)	149.10	n
	am	(P-15291)		
148.70	am	(P-14540/92; A-3296)	149.25	am
	am	(P-15291)		
148.80	am	(P-6035; A-14643)	149.50	am
	r	(P-10868/92; A-131)		
148.82	n	(P-12826/92; RC-6549; A-6649)	149.75	am
	am	(P-15291)		
148.120	am	(P-14540/92; A-3296)	149.100	am
	am	(P-15291)		
148.130	am	(P-14540/92; A-3296)	149.105	am
	am	(P-15291)		
148.140	am	(P-14540/92; A-3296)	149.125	am
	am	(P-15291)		
148.150	am	(P-14540/92; A-3296)	149.140	n
	am	(P-15291)		
148.160	am	(P-14540/92; A-3296)		
	am	(P-15291)	149.150	am
148.170	am	(P-14540/92; A-3296)		
	am	(P-15291)	160.1	am
148.180	am	(P-15291)	160.5	am
	am	(P-14540/92; A-3296)	160.15	n
	am	(P-15291)	160.25	n
148.190	am	(P-14540/92; A-3296)	160.65	am
148.200	am	(P-14540/92; A-3296)	160.70	am
	am	(P-15291)	160.77	n
148.210	am	(P-14540/92; A-3296)	160.85	n
	am	(P-15291)	165.70	am
148.220	am	(P-14540/92; A-3296)	165.104	am
148.230	am	(P-14540/92; A-3296)	170.10	n
	am	(P-15291)	170.20	n
148.240	am	(P-14540/92; A-3296)	170.30	n
	am	(P-15291)	170.40	n
148.250	am	(P-14540/92; A-3296)	170.50	am
	am	(P-15291)	220.625	am

SAI-69

ILLINOIS REGISTER
Volume 17, Issue #39
SECTIONS AFFECTED INDEX
September 24, 1993

ILLINOIS REGISTER
Volume 17, Issue #39
SECTIONS AFFECTED INDEX
September 24, 1993

TITLE 89 (CONT'D)		TITLE 89 (CONT'D)	
510.105	n	553.30	n
510.110	am	553.40	n
510.120	am	553.50	n
515.100	am	553.60	n
515.110	n	553.70	n
515.120	n	553.80	n
515.130	n	553.90	n
515.140	n	553.100	n
515.150	n	553.110	n
515.400	am	553.120	n
515.410	n	553.130	n
515.420	n	553.140	n
515.430	n	557.10	am
515.440	n	557.20	am
515.450	n	557.30	am
525.500	n	557.40	am
530.5	am	562.20	am
530.10	am	562.30	am
530.110	am	562.40	am
530.130	am	562.60	am
530.200	am	562.70	am
530.230	am	562.80	am
530.240	am	562.90	am
530.250	n	567.20	am
530.260	am	567.30	am
540.10	r	567.100	am
540.30	r	572.20	am
540.40	r	572.30	n
540.50	n	572.50	am
552.10	r	572.60	r,n
552.20	r	572.70	am
552.30	r	572.80	am
552.35	r	572.90	am
552.40	r	572.100	am
552.50	r	572.110	n
552.60	r	587.10	r
552.70	r	587.20	r
552.80	r	587.30	r
552.90	r	587.40	r
552.100	r	587.50	r
552.110	r	587.60	r
552.120	r	587.70	r
553.10	n	587.105	r
553.20	n		

TITLE 89 (CONT'D)

592.20	r	(P-11422) (E-11864)	685.150	am	(P-18947/92; A-6256)
592.30	r	(P-11422) (E-11864)	690.100	am	(P-15065/92; A-3675)
592.40	r	(P-11422) (E-11864)	690.200	am	(P-15065/92; A-3675)
592.45	r	(P-11422) (E-11864)	690.300	am	(P-15065/92; A-3675)
592.50	am	(P-1375; W-3687)	708.300	am	(P-9852; E-10003)
	r	(P-11422) (E-11864)	730.10	am	(P-11398) (E-11745)
592.55	r	(P-11422) (E-11864)	730.20	am	(P-11398) (E-11745)
592.60	r	(P-11422) (E-11864)	730.30	am	(P-11398) (E-11745)
592.65	r	(P-11422) (E-11864)	730.200	am	(P-11398) (E-11745)
592.70	r	(P-11422) (E-11864)	730.210	am	(P-11398) (E-11745)
592.75	r	(P-11422) (E-11864)	730.220	am	(P-11398) (E-11745)
592.80	am	(P-1375; W-3687)	730.230	am	(P-11398) (E-11745)
	r	(P-11422) (E-11864)	730.250	am	(P-11398) (E-11745)
592.85	r	(P-11422) (E-11864)	730.400	am	(P-11398) (E-11745)
592.90	r	(P-11422) (E-11864)	730.410	am	(P-11398) (E-11745)
592.95	r	(P-11422) (E-11864)	730.420	am	(P-11398) (E-11745)
597.10	r	(P-11420) (E-11856)	730.430	am	(P-11398) (E-11745)
597.15	r	(P-11420) (E-11856)	730.440	am	(P-11398) (E-11745)
597.20	r	(P-11420) (E-11856)	730.460	am	(P-11398) (E-11745)
597.100	r	(P-11420) (E-11856)	730.600	am	(P-11398) (E-11745)
597.150	r	(P-11420) (E-11856)	730.650	am	(P-11398) (E-11745)
597.200	r	(P-11420) (E-11856)	730.700	r	(P-10397/92; A-425)
597.300	r	(P-11420) (E-11856)	827.10	am	(P-77; A-6260)
597.310	r	(P-11420) (E-11856)	827.30	am	(P-77; A-6260)
597.320	r	(P-11420) (E-11856)	827.40	am	(P-77; A-6260)
597.330	r	(P-11420) (E-11856)	830.50	am	(P-18759/92; A-6248)
597.400	r	(P-11420) (E-11856)	897.10	n	(E-6886)
597.410	r	(P-11404) (E-11780)	897.20	n	(E-6886)
602.10	r	(P-11404) (E-11780)	897.30	n	(E-6886)
602.20	r	(P-11404) (E-11780)	897.40	n	(E-6886)
607.10	r	(P-11408) (E-11796)	897.50	n	(E-6886)
607.20	r	(P-11408) (E-11796)	897.60	n	(E-6886)
607.50	r	(P-11408) (E-11796)	1177.10	am	(P-11400) (E-11766)
607.60	r	(P-11408) (E-11796)	1200.10	am	(P-15354/92; A-1137)
612.10	r	(P-11410) (E-11801)	1200.20	am	(P-15354/92; A-1137)
612.20	r	(P-11410) (E-11801)	1200.30	am	(P-15354/92; A-1137)
617.20	am	(P-11390) (E-11686)			(E-8052; W-8318)
617.30	am	(P-11390) (E-11686)			(E-9735; O-13198)
617.50	am	(P-11390) (E-11686)			(P-15354/92; A-1137)
617.60	am	(P-11390) (E-11686)			(P-15354/92; A-1137)
617.80	am	(P-11390) (E-11686)			(E-8052; W-8318)
617.110	am	(P-11390) (E-11686)	1200.40	am	(E-9735; O-13198)
622.10	r	(P-11412) (E-11804)	1200.50	am	(P-15354/92; A-1137)
622.20	r	(P-11412) (E-11804)			(E-8052; W-8318)
622.30	r	(P-11412) (E-11804)			(E-9735; O-13198)
657.10	r	(P-11414) (E-11808)	1200.60	am	(P-15354/92; A-1137)
657.20	r	(P-11414) (E-11808)			
680.300	am	(P-943; A-7230)			

TITLE 89 (CONT'D)

1200.70	am	(P-15354/92; A-1137)	77.110	n	(P-1789; A-9057)
		(P-7780; O-14188)	77.120	n	(P-1789; A-9057)
		(E-8052; W-8318)	77.130	n	(P-1789; A-9057)
		(E-9735; O-13198)	77.140	n	(P-1789; A-9057)
1200.80	am	(P-15354/92; A-1137)	77.Ex.A	n	(P-1789; A-9057)
1200.100	am	(P-15354/92; A-1137)	386.1000	am	(P-13734)
1200.110	am	(P-15354/92; A-1137)	386.1010	am	(P-13734)
1200.Ap.A	am	(P-15354/92; A-1137)	386.1140	am	(P-13734)
		(P-7780) (E-8052;	390.1000	am	(P-13986)
		O-13198)	390.1010	am	(P-13986)
			390.1020	am	(P-13986)
			390.1030	am	(P-13986)
			390.2000	am	(P-13986)
			391.1000	am	(P-13739)
			391.2000	am	(P-13739)
			392.2000	am	(P-13690)
			393.2000	am	(P-13730)
			395.2000	am	(P-13693)
			396.2000	am	(P-13699)
			396.2010	am	(P-13699)
			397.1010	am	(P-13686)
			397.1020	am	(P-13686)
			440.520	am	(P-15835/92; A-3530)
			442.435	am	(P-15845/92; A-3540)
			451.10	am	(P-3110; A-12839)
			451.15	am.#	(P-3110; A-12839)
			451.20	am	(P-3110; A-12839)
			451.25	am	(P-3110; A-12839)
			451.50	#	(P-3110; A-12839)
			451.60	am	(P-3110; A-12839)
			451.70	am	(P-3110; A-12839)
			451.80	am	(P-3110; A-12839)
			451.90	am	(P-3110; A-12839)
			451.100	am	(P-3110; A-12839)
			451.110	am	(P-3110; A-12839)
			451.120	am	(P-3110; A-12839)
			451.130	am	(P-3110; A-12839)
			451.140	am	(P-3110; A-12839)
			451.150	am	(P-3110; A-12839)
			451.160	am	(P-3110; A-12839)
			451.Ap.F	am	(P-3110; A-12839)
			451.II.C	n	(P-3110)
			451.II.D	n	(P-3110)
			453.10	n	(P-2186; A-8563)
			453.20	n	(P-2186; A-8563)
			453.30	n	(P-2186; A-8563)
			454.20	am	(P-12278)
			454.30	am	(P-12278)

TITLE 92 (CONT'D)	
1001.540	n
1030.16	n
1030.17	n
1030.18	n
1030.92	am
1030.115	am
1030.120	am
1030.130	am
1040.20	am
1040.101	am
1040.102	am
1070.100	am
1236.10	n
1360.40	am
1375.10	r
1375.15	r
1375.20	r
1375.30	r
1375.40	r
1375.50	r
1375.60	r
1375.70	r
1375.80	r
1375.85	r
1375.1000	r
1375.1010	r
1375.1020	r
1375.1030	r
1375.1040	r
1375.1050	r
1375.1060	r
1375.1070	r
1375.1080	r
1375.1090	r
1375.1100	r
1375.1110	r
1375.1120	r
1375.1130	r
1375.1140	r
1375.1150	r
1375.1160	r
1375.1170	r
1375.1210	r
1375.2020	r
1375.2030	r
1375.2040	r

TITLE 92 (CONT'D)

2520.26	r	(P-566; A-8536)	2520.221	n	(P-542; A-8539)
2520.105	n	(P-542; A-8539)	2520.221	r	(P-566; A-8536)
2520.105	r	(P-566; A-8536)	2520.222	n	(P-542; A-8539)
2520.110	n	(P-542; A-8539)	2520.222	r	(P-566; A-8536)
2520.110	r	(P-566; A-8536)	2520.223	n	(P-542; A-8539)
2520.200	n	(P-542; A-8539)	2520.223	r	(P-566; A-8536)
2520.200	r	(P-566; A-8536)	2520.224	n	(P-542; A-8539)
2520.201	n	(P-542; A-8539)	2520.224	r	(P-566; A-8536)
2520.201	r	(P-566; A-8536)	2520.225	n	(P-542; A-8539)
2520.202	n	(P-542; A-8539)	2520.225	r	(P-566; A-8536)
2520.202	r	(P-566; A-8536)	2520.226	n	(P-542; A-8539)
2520.203	n	(P-542; A-8539)	2520.226	r	(P-566; A-8536)
2520.203	r	(P-566; A-8536)	2520.300	n	(P-542; A-8539)
2520.204	n	(P-542; A-8539)	2520.300	r	(P-566; A-8536)
2520.204	r	(P-566; A-8536)	2520.301	n	(P-542; A-8539)
2520.205	n	(P-542; A-8539)	2520.301	r	(P-566; A-8536)
2520.205	r	(P-566; A-8536)	2520.302	n	(P-542; A-8539)
2520.206	n	(P-542; A-8539)	2520.302	r	(P-566; A-8536)
2520.206	r	(P-566; A-8536)	2520.303	n	(P-542; A-8539)
2520.207	n	(P-542; A-8539)	2520.303	r	(P-566; A-8536)
2520.207	r	(P-566; A-8536)	2520.304	n	(P-542; A-8539)
2520.208	n	(P-542; A-8539)	2520.304	r	(P-566; A-8536)
2520.208	r	(P-566; A-8536)	2520.305	n	(P-542; A-8539)
2520.209	n	(P-542; A-8539)	2520.305	r	(P-566; A-8536)
2520.209	r	(P-566; A-8536)	2520.400	n	(P-542; A-8539)
2520.210	n	(P-542; A-8539)	2520.400	r	(P-566; A-8536)
2520.210	r	(P-566; A-8536)	2520.401	n	(P-542; A-8539)
2520.211	n	(P-542; A-8539)	2520.401	r	(P-566; A-8536)
2520.211	r	(P-566; A-8536)	2520.402	n	(P-542; A-8539)
2520.212	n	(P-542; A-8539)	2520.402	r	(P-566; A-8536)
2520.212	r	(P-566; A-8536)	2520.403	n	(P-542; A-8539)
2520.213	n	(P-542; A-8539)	2520.403	r	(P-566; A-8536)
2520.213	r	(P-566; A-8536)	2520.404	n	(P-542; A-8539)
2520.214	n	(P-542; A-8539)	2520.404	r	(P-566; A-8536)
2520.214	r	(P-566; A-8536)	2520.405	n	(P-542; A-8539)
2520.215	n	(P-542; A-8539)	2520.405	r	(P-566; A-8536)
2520.215	r	(P-566; A-8536)	2520.406	n	(P-542; A-8539)
2520.216	n	(P-542; A-8539)	2520.406	r	(P-566; A-8536)
2520.216	r	(P-566; A-8536)	2520.500	n	(P-542; A-8539)
2520.217	n	(P-542; A-8539)	2520.500	r	(P-566; A-8536)
2520.217	r	(P-566; A-8536)	2520.501	n	(P-542; A-8539)
2520.218	n	(P-542; A-8539)	2520.501	r	(P-566; A-8536)
2520.218	r	(P-566; A-8536)	2520.502	n	(P-542; A-8539)
2520.219	n	(P-542; A-8539)	2520.502	r	(P-566; A-8536)
2520.219	r	(P-566; A-8536)	2520.503	n	(P-542; A-8539)
2520.220	n	(P-542; A-8539)	2520.503	r	(P-566; A-8536)
2520.220	r	(P-566; A-8536)	2520.504	n	(P-542; A-8539)
2520.220	r	(P-566; A-8536)	2520.504	r	(P-566; A-8536)
2520.220	r	(P-566; A-8536)	2520.600	n	(P-542; A-8539)
2520.220	r	(P-566; A-8536)	2520.600	r	(P-566; A-8536)
2520.220	r	(P-566; A-8536)	2520.601	n	(P-542; A-8539)
2520.220	r	(P-566; A-8536)	2520.601	r	(P-566; A-8536)
2520.220	r	(P-566; A-8536)	2520.602	n	(P-542; A-8539)
2520.220	r	(P-566; A-8536)	2520.602	r	(P-566; A-8536)
2520.220	r	(P-566; A-8536)	2520.603	n	(P-542; A-8539)
2520.220	r	(P-566; A-8536)	2520.603	r	(P-566; A-8536)
2520.220	r	(P-566; A-8536)	2520.604	n	(P-542; A-8539)
2520.220	r	(P-566; A-8536)	2520.604	r	(P-566; A-8536)

Name		Address		City		State		Zip	
1	John A. Smith	123 Main St	Springfield	Mass	01103	1	John A. Smith	123 Main St	Springfield
2	Robert L. Jones	456 Oak Ave	Worcester	Mass	01601	2	Robert L. Jones	456 Oak Ave	Worcester
3	William E. Brown	789 Elm St	Lowell	Mass	01850	3	William E. Brown	789 Elm St	Lowell
4	Charles F. Davis	101 Pine St	Andover	Mass	01810	4	Charles F. Davis	101 Pine St	Andover
5	Thomas H. Wilson	202 Cedar St	Chelsea	Mass	02118	5	Thomas H. Wilson	202 Cedar St	Chelsea
6	James K. Moore	303 Birch St	Cambridge	Mass	02139	6	James K. Moore	303 Birch St	Cambridge
7	Richard M. Taylor	404 Maple St	Boston	Mass	02108	7	Richard M. Taylor	404 Maple St	Boston
8	Donald P. White	505 Elm St	Quincy	Mass	02269	8	Donald P. White	505 Elm St	Quincy
9	Edward G. Black	606 Oak St	Roslindale	Mass	02126	9	Edward G. Black	606 Oak St	Roslindale
10	Frank J. Green	707 Pine St	Dorchester	Mass	02122	10	Frank J. Green	707 Pine St	Dorchester
11	George L. Hall	808 Cedar St	Boston	Mass	02109	11	George L. Hall	808 Cedar St	Boston
12	Harold R. King	909 Birch St	Cambridge	Mass	02142	12	Harold R. King	909 Birch St	Cambridge
13	Arthur S. Lee	1010 Maple St	Boston	Mass	02107	13	Arthur S. Lee	1010 Maple St	Boston
14	Walter T. Young	1111 Elm St	Quincy	Mass	02269	14	Walter T. Young	1111 Elm St	Quincy
15	Philip M. Baker	1212 Oak St	Roslindale	Mass	02126	15	Philip M. Baker	1212 Oak St	Roslindale
16	Samuel N. Adams	1313 Pine St	Dorchester	Mass	02122	16	Samuel N. Adams	1313 Pine St	Dorchester
17	Benjamin O. Baker	1414 Cedar St	Boston	Mass	02109	17	Benjamin O. Baker	1414 Cedar St	Boston
18	William P. Jones	1515 Birch St	Cambridge	Mass	02142	18	William P. Jones	1515 Birch St	Cambridge
19	Robert Q. Smith	1616 Maple St	Boston	Mass	02107	19	Robert Q. Smith	1616 Maple St	Boston
20	John R. Brown	1717 Elm St	Quincy	Mass	02269	20	John R. Brown	1717 Elm St	Quincy
21	Charles S. Davis	1818 Oak St	Roslindale	Mass	02126	21	Charles S. Davis	1818 Oak St	Roslindale
22	Thomas T. Wilson	1919 Pine St	Dorchester	Mass	02122	22	Thomas T. Wilson	1919 Pine St	Dorchester
23	James U. Moore	2020 Cedar St	Boston	Mass	02109	23	James U. Moore	2020 Cedar St	Boston
24	Richard V. Taylor	2121 Birch St	Cambridge	Mass	02142	24	Richard V. Taylor	2121 Birch St	Cambridge
25	Donald W. White	2222 Maple St	Boston	Mass	02107	25	Donald W. White	2222 Maple St	Boston
26	Edward X. Black	2323 Elm St	Quincy	Mass	02269	26	Edward X. Black	2323 Elm St	Quincy
27	Frank Y. Green	2424 Oak St	Roslindale	Mass	02126	27	Frank Y. Green	2424 Oak St	Roslindale
28	George Z. Hall	2525 Pine St	Dorchester	Mass	02122	28	George Z. Hall	2525 Pine St	Dorchester
29	Harold A. King	2626 Cedar St	Boston	Mass	02109	29	Harold A. King	2626 Cedar St	Boston
30	Arthur B. Lee	2727 Birch St	Cambridge	Mass	02142	30	Arthur B. Lee	2727 Birch St	Cambridge
31	Walter C. Young	2828 Maple St	Boston	Mass	02107	31	Walter C. Young	2828 Maple St	Boston
32	Philip D. Baker	2929 Elm St	Quincy	Mass	02269	32	Philip D. Baker	2929 Elm St	Quincy
33	Samuel E. Adams	3030 Oak St	Roslindale	Mass	02126	33	Samuel E. Adams	3030 Oak St	Roslindale
34	Benjamin F. Baker	3131 Pine St	Dorchester	Mass	02122	34	Benjamin F. Baker	3131 Pine St	Dorchester
35	William G. Jones	3232 Cedar St	Boston	Mass	02109	35	William G. Jones	3232 Cedar St	Boston
36	Robert H. Smith	3333 Birch St	Cambridge	Mass	02142	36	Robert H. Smith	3333 Birch St	Cambridge
37	John I. Brown	3434 Maple St	Boston	Mass	02107	37	John I. Brown	3434 Maple St	Boston
38	Charles J. Davis	3535 Elm St	Quincy	Mass	02269	38	Charles J. Davis	3535 Elm St	Quincy
39	Thomas K. Wilson	3636 Oak St	Roslindale	Mass	02126	39	Thomas K. Wilson	3636 Oak St	Roslindale
40	James L. Moore	3737 Pine St	Dorchester	Mass	02122	40	James L. Moore	3737 Pine St	Dorchester
41	Richard M. Taylor	3838 Cedar St	Boston	Mass	02109	41	Richard M. Taylor	3838 Cedar St	Boston
42	Donald N. White	3939 Birch St	Cambridge	Mass	02142	42	Donald N. White	3939 Birch St	Cambridge
43	Edward O. Black	4040 Maple St	Boston	Mass	02107	43	Edward O. Black	4040 Maple St	Boston
44	Frank P. Green	4141 Elm St	Quincy	Mass	02269	44	Frank P. Green	4141 Elm St	Quincy
45	George Q. Hall	4242 Oak St	Roslindale	Mass	02126	45	George Q. Hall	4242 Oak St	Roslindale
46	Harold R. King	4343 Pine St	Dorchester	Mass	02122	46	Harold R. King	4343 Pine St	Dorchester
47	Arthur S. Lee	4444 Cedar St	Boston	Mass	02109	47	Arthur S. Lee	4444 Cedar St	Boston
48	Walter T. Young	4545 Birch St	Cambridge	Mass	02142	48	Walter T. Young	4545 Birch St	Cambridge
49	Philip M. Baker	4646 Maple St	Boston	Mass	02107	49	Philip M. Baker	4646 Maple St	Boston
50	Samuel N. Adams	4747 Elm St	Quincy	Mass	02269	50	Samuel N. Adams	4747 Elm St	Quincy
51	Benjamin O. Baker	4848 Oak St	Roslindale	Mass	02126	51	Benjamin O. Baker	4848 Oak St	Roslindale
52	William P. Jones	4949 Pine St	Dorchester	Mass	02122	52	William P. Jones	4949 Pine St	Dorchester
53	Robert Q. Smith	5050 Cedar St	Boston	Mass	02109	53	Robert Q. Smith	5050 Cedar St	Boston
54	John R. Brown	5151 Birch St	Cambridge	Mass	02142	54	John R. Brown	5151 Birch St	Cambridge
55	Charles S. Davis	5252 Maple St	Boston	Mass	02107	55	Charles S. Davis	5252 Maple St	Boston
56	Thomas T. Wilson	5353 Elm St	Quincy	Mass	02269	56	Thomas T. Wilson	5353 Elm St	Quincy
57	James U. Moore	5454 Oak St	Roslindale	Mass	02126	57	James U. Moore	5454 Oak St	Roslindale
58	Richard V. Taylor	5555 Pine St	Dorchester	Mass	02122	58	Richard V. Taylor	5555 Pine St	Dorchester
59	Donald W. White	5656 Cedar St	Boston	Mass	02109	59	Donald W. White	5656 Cedar St	Boston
60	Edward X. Black	5757 Birch St	Cambridge	Mass	02142	60	Edward X. Black	5757 Birch St	Cambridge
61	Frank Y. Green	5858 Maple St	Boston	Mass	02107	61	Frank Y. Green	5858 Maple St	Boston
62	George Z. Hall	5959 Elm St	Quincy	Mass	02269	62	George Z. Hall	5959 Elm St	Quincy
63	Harold A. King	6060 Oak St	Roslindale	Mass	02126	63	Harold A. King	6060 Oak St	Roslindale
64	Arthur B. Lee	6161 Pine St	Dorchester	Mass	02122	64	Arthur B. Lee	6161 Pine St	Dorchester
65	Walter C. Young	6262 Cedar St	Boston	Mass	02109	65	Walter C. Young	6262 Cedar St	Boston
66	Philip D. Baker	6363 Birch St	Cambridge	Mass	02142	66	Philip D. Baker	6363 Birch St	Cambridge
67	Samuel E. Adams	6464 Maple St	Boston	Mass	02107	67	Samuel E. Adams	6464 Maple St	Boston
68	Benjamin F. Baker	6565 Elm St	Quincy	Mass	02269	68	Benjamin F. Baker	6565 Elm St	Quincy
69	William G. Jones	6666 Oak St	Roslindale	Mass	02126	69	William G. Jones	6666 Oak St	Roslindale
70	Robert H. Smith	6767 Pine St	Dorchester	Mass	02122	70	Robert H. Smith	6767 Pine St	Dorchester
71	John I. Brown	6868 Cedar St	Boston	Mass	02109	71	John I. Brown	6868 Cedar St	Boston
72	Charles J. Davis	6969 Birch St	Cambridge	Mass	02142	72	Charles J. Davis	6969 Birch St	Cambridge
73	Thomas K. Wilson	7070 Maple St	Boston	Mass	02107	73	Thomas K. Wilson	7070 Maple St	Boston
74	James L. Moore	7171 Elm St	Quincy	Mass	02269	74	James L. Moore	7171 Elm St	Quincy
75	Richard M. Taylor	7272 Oak St	Roslindale	Mass	02126	75	Richard M. Taylor	7272 Oak St	Roslindale
76	Donald N. White	7373 Pine St	Dorchester	Mass	02122	76	Donald N. White	7373 Pine St	Dorchester
77	Edward O. Black	7474 Cedar St	Boston	Mass	02109	77	Edward O. Black	7474 Cedar St	Boston
78	Frank P. Green	7575 Birch St	Cambridge	Mass	02142	78	Frank P. Green	7575 Birch St	Cambridge
79	George Q. Hall	7676 Maple St	Boston	Mass	02107	79	George Q. Hall	7676 Maple St	Boston
80	Harold R. King	7777 Elm St	Quincy	Mass	02269	80	Harold R. King	7777 Elm St	Quincy
81	Arthur S. Lee	7878 Oak St	Roslindale	Mass	02126	81	Arthur S. Lee	7878 Oak St	Roslindale
82	Walter T. Young	7979 Pine St	Dorchester	Mass	02122	82	Walter T. Young	7979 Pine St	Dorchester
83	Philip M. Baker	8080 Cedar St	Boston	Mass	02109	83	Philip M. Baker	8080 Cedar St	Boston
84	Samuel N. Adams	8181 Birch St	Cambridge	Mass	02142	84	Samuel N. Adams	8181 Birch St	Cambridge
85	Benjamin O. Baker	8282 Maple St	Boston	Mass	02107	85	Benjamin O. Baker	8282 Maple St	Boston
86	William P. Jones	8383 Elm St	Quincy	Mass	02269	86	William P. Jones	8383 Elm St	Quincy
87	Robert Q. Smith	8484 Oak St	Roslindale	Mass	02126	87	Robert Q. Smith	8484 Oak St	Roslindale
88	John R. Brown	8585 Pine St	Dorchester	Mass	02122	88	John R. Brown	8585 Pine St	Dorchester
89	Charles S. Davis	8686 Cedar St	Boston	Mass	02109	89	Charles S. Davis	8686 Cedar St	Boston
90	Thomas T. Wilson	8787 Birch St	Cambridge	Mass	02142	90	Thomas T. Wilson	8787 Birch St	Cambridge
91	James U. Moore	8888 Maple St	Boston	Mass	02107	91	James U. Moore	8888 Maple St	Boston
92	Richard V. Taylor	8989 Elm St	Quincy	Mass	02269	92	Richard V. Taylor	8989 Elm St	Quincy
93	Donald W. White	9090 Oak St	Roslindale	Mass	02126	93	Donald W. White	9090 Oak St	Roslindale
94	Edward X. Black	9191 Pine St	Dorchester	Mass	02122	94	Edward X. Black	9191 Pine St	Dorchester
95	Frank Y. Green	9292 Cedar St	Boston	Mass	02109	95	Frank Y. Green	9292 Cedar St	Boston
96	George Z. Hall	9393 Birch St	Cambridge	Mass	02142	96	George Z. Hall	9393 Birch St	Cambridge
97	Harold A. King	9494 Maple St	Boston	Mass	02107	97	Harold A. King	9494 Maple St	Boston
98	Arthur B. Lee	9595 Elm St	Quincy	Mass	02269	98	Arthur B. Lee	9595 Elm St	Quincy
99	Walter C. Young	9696 Oak St	Roslindale	Mass	02126	99	Walter C. Young	9696 Oak St	Roslindale
100	Philip D. Baker	9797 Pine St	Dorchester	Mass	02122	100	Philip D. Baker	9797 Pine St	Dorchester

NAME	ADDRESS	CITY	STATE	ZIP	NAME	ADDRESS	CITY	STATE	ZIP
101	John A. Smith	101 Main St	Springfield	Mass	01103	101	John A. Smith	101 Main St	Springfield
102	Robert L. Jones	102 Oak Ave	Worcester	Mass	01601	102	Robert L. Jones	102 Oak Ave	Worcester
103	William E. Brown	103 Elm St	Lowell	Mass	01850	103	William E. Brown	103 Elm St	Lowell
104	Charles F. Davis	104 Pine St	Andover	Mass	01810	104	Charles F. Davis	104 Pine St	Andover
105	Thomas H. Wilson	105 Cedar St	Chelsea	Mass	02118	105	Thomas H. Wilson	105 Cedar St	Chelsea
106	James K. Moore	106 Birch St	Cambridge	Mass	02139	106	James K. Moore	106 Birch St	Cambridge
107	Richard M. Taylor	107 Maple St	Boston	Mass	02108	107	Richard M. Taylor	107 Maple St	Boston
108	Donald P. White	108 Elm St	Quincy	Mass	02269	108	Donald P. White	108 Elm St	Quincy
109	Edward G. Black	109 Oak St	Roslindale	Mass	02126	109	Edward G. Black	109 Oak St	Roslindale
110	Frank J. Green	110 Pine St	Dorchester	Mass	02122	110	Frank J. Green	110 Pine St	Dorchester
111	George L. Hall	111 Cedar St	Boston	Mass	02109	111	George L. Hall	111 Cedar St	Boston
112	Harold R. King	112 Birch St	Cambridge	Mass	02142	112	Harold R. King	112 Birch St	Cambridge
113	Arthur S. Lee	113 Maple St	Boston	Mass	02107	113	Arthur S. Lee	113 Maple St	Boston
114	Walter T. Young	114 Elm St	Quincy	Mass	02269	114	Walter T. Young	114 Elm St	Quincy
115	Philip M. Baker	115 Oak St	Roslindale	Mass	02126	115	Philip M. Baker	115 Oak St	Roslindale
116	Samuel N. Adams	116 Pine St	Dorchester	Mass	02122	116	Samuel N. Adams	116 Pine St	Dorchester
117	Benjamin O. Baker	117 Cedar St	Boston	Mass	02109	117	Benjamin O. Baker	117 Cedar St	Boston
118	William P. Jones	118 Birch St	Cambridge	Mass	02142	118	William P. Jones	118 Birch St	Cambridge
119	Robert Q. Smith	119 Maple St	Boston	Mass	02107	119	Robert Q. Smith	119 Maple St	Boston
120	John R. Brown	120 Elm St	Quincy	Mass	02269	120	John R. Brown	120 Elm St	Quincy
121	Charles S. Davis	121 Oak St	Roslindale	Mass	02126	121	Charles S. Davis	121 Oak St	Roslindale
122	Thomas T. Wilson	122 Pine St	Dorchester	Mass	02122	122	Thomas T. Wilson	122 Pine St	Dorchester
123	James U. Moore	123 Cedar St	Boston	Mass	02109	123	James U. Moore	123 Cedar St	Boston
124	Richard V. Taylor	124 Birch St	Cambridge	Mass	02142	124	Richard V. Taylor	124 Birch St	Cambridge
125	Donald W. White	125 Maple St	Boston	Mass	02107	125	Donald W. White	125 Maple St	Boston
126	Edward X. Black	126 Elm St	Quincy	Mass	02269	126	Edward X. Black	126 Elm St	Quincy
127	Frank Y. Green	127 Oak St	Roslindale	Mass	02126	127	Frank Y. Green	127 Oak St	Roslindale
128	George Z. Hall	128 Pine St	Dorchester	Mass	02122	128	George Z. Hall	128 Pine St	Dorchester
129	Harold A. King	129 Cedar St	Boston	Mass	02109	129	Harold A. King	129 Cedar St	Boston
130	Arthur B. Lee	130 Birch St	Cambridge	Mass	02142	130	Arthur B. Lee	130 Birch St	Cambridge
131	Walter C. Young	131 Maple St	Boston	Mass	02107	131	Walter C. Young	131 Maple St	Boston
132	Philip D. Baker	132 Elm St	Quincy	Mass	02269	132	Philip D. Baker	132 Elm St	Quincy
133	Samuel E. Adams	133 Oak St	Roslindale	Mass	02126	133	Samuel E. Adams	133 Oak St	Roslindale
134	Benjamin F. Baker	134 Pine St	Dorchester	Mass	02122	134	Benjamin F. Baker	134 Pine St	Dorchester
135	William G. Jones	135 Cedar St	Boston	Mass	02109	135	William G. Jones	135 Cedar St	Boston
136	Robert H. Smith	136 Birch St	Cambridge	Mass	02142	136	Robert H. Smith	136 Birch St	Cambridge
137	John I. Brown	137 Maple St	Boston	Mass	02107	137	John I. Brown	137 Maple St	Boston
138						138			
139						139			
140						140			
141						141			
142						142			
143						143			
144						144			
145						145			
146						146			
147						147			
148						148			
149						149			
150						150			